2011 INSTRUCTIONS TO APPLICANTS

You are invited to submit an application to the California Department of Mental Health (DMH) for the project numbered and titled:

EMHI-2011
Department of Mental Health - EARLY MENTAL HEALTH INITIATIVE (EMHI)

This Request for Application (RFA) is being issued in accordance with the provisions of Section 4380 of the Welfare and Institutions Code. It is anticipated that approximately **$4.6 million** will be available to fund new EMHI programs in FY 2011-12; however, the amount, if any, available for this purpose shall not be appropriated until the approval of the California State Budget for FY 2011-12. Any awards from this RFA are contingent on the passage of the FY 2011-12 State Budget with specific inclusion of funds for new EMHI programs. Throughout this RFA, the term "applicant" refers to the Local Education Agency (LEA) submitting an EMHI grant application.

Applicants should understand that, until the final approval of a FY 2011-12 California State Budget, which includes funding for new EMHI programs, a fundable score in the RFA process is no guarantee of funding.

The amount of grant funding and number of school sites for which school districts may apply is based upon the number of kindergarten through third grade students enrolled in the LEA. The table on Page 11 of the RFA specifies the maximum amount of funds and number of sites that may be included for each LEA.

A.   TECHNICAL ASSISTANCE TO APPLICANTS

DMH will, to the extent possible with available resources, make technical assistance available to applicants who request help with eligibility determination, budget preparation, and clarification of provisions in this RFA.

It is anticipated that the DMH will conduct three Information Meetings to provide details on the requirements of the RFA and application development. If you are interested in attending one of these meetings, email DMHEMHI@dmh.ca.gov for more information. Specific information will be posted on the DMH website as the details are determined.

Contact the Technical Assistance Consultant (TAC) for your region for information regarding application type, program services, program development, implementation issues, the RFA process and budget preparation. TAC telephone numbers, fax numbers and regions of responsibility are listed on Page iii.

Any question that may materially alter the RFA requirements must be submitted in writing to the **Department of Mental Health, EMHI Staff, Grant Programs Management Unit, 1600 9th Street, Room 150, Sacramento, CA 95814**, by March 31, 2011. DMH will provide the answers to these questions in writing to all applicants by April 21, 2011.

B.   TIME SCHEDULE

NOTE: This schedule is contingent upon a number of factors, including the availability of funds and the date the final State Budget is approved. Should any significant date be modified, applicants will be notified by the DMH.

All applicants are hereby advised of the following time schedule:

1.   Release of RFA notification announced on DMH website   February 8, 2011

2.   RFA Information Meetings   March 1, 2011 (Burbank)

                                                                                                      March 3, 2011 (Fresno)

                                                                                                      March 9, 2011 (Sacramento)

3.   Any question that may materially alter the RFA requirements must be submitted in writing to the DMH EMHI Staff,   March 31, 2011

4.   **Notice of Intent to Apply submitted to DMH**   April 1, 2011

PLEASE SUBMIT THIS FORM BY <u>APRIL 1, 2011</u> to:
Grant Programs Management
1600 9th Street, Room 150
Sacramento, CA 95814
Or fax to (916) 654-2739

5.   DMH responds to questions that may alter RFA requirements   April 21, 2011

6.   The original signed Application, three copies, and an electronic version (thumb drive or CD-R), must be received no later than 5:00 p.m. by DMH   May 9, 2011

7.   Evaluation and scoring of applications   June/July 2011

8.   Did Not Pass/ No Funds Notification Letter mailed (Projected Date)   July 2011

9.   Posting of Award Notification Letter List (Projected Date)   August 2011

10.   Award Notification Letter mailed (Projected Date)   September 2011

11.   Mandatory orientation meeting for Project Coordinators   September 2011
       and School Based Mental Health Professionals (Projected Date)

12.   Mandatory Training Conference (Projected Date)   November 2011

13.   Term of Grant (Projected Start Date):   Upon DMH "Intent to Award" Notice —
                                                                                        June 30, 2014

The term of the annual allocation will be for a period of no greater than one year, each year of the three-year grant period, and is contingent upon the availability of funding through the Budget Act in each fiscal year covered by the grant, and the date the final State Budget is approved.

Early Mental Health Initiative
Contact Information through June 30, 2011
Program Chart

State Level Program Administration
Grant Programs Management
Sue Lyle
Jeannette Eagan
Claire Quillici
Galina Semeryuk

General Office Telephone:
(916) 651-3740
Office FAX: (916) 654-2739
E-mail: DMHEMHI@dmh.ca.gov

Region I	**Region II**	**Region III**	**Region IV**	**Region V**	**Region VI**
Scott Lindstrom TAC (530) 891-3000 ext. 162 FAX:(530) 891-3220 slindstr@chicousd.org	Debbie Wong TAC (916) 688-1921 FAX:(916) 689-2091 dwongoka@egusd.net	Paul Teuber TAC (916) 525-0630 FAX:(916) 525-0725 pteuber@egusd.net	Sandy Maeshiro TAC (310) 387-7767 smaeshiro@gmail.com	Karen Zuk TAC (909) 628-1201 ext. 6774 FAX:(909) 548-6090 karen_zuk@chino.k12.ca.us	Alyse Kirschen TAC (626) 854-8520 ext. 6106 FAX:(866) 801-4739 akirschen@rowland.k12.ca.us

Region I		Region II		Region III	Region IV	Region V	Region VI
Alameda					West Los Angeles	East Los Angeles	San Diego
Butte		Amador		Monterey	Orange	Imperial	(except San Diego
Colusa		Calaveras		Sacramento	Rowland USD	Riverside	USD)
Contra Costa	Alpine	El Dorado	Kern	San Benito		San Bernardino	
Del Norte		Fresno		San Diego USD			
Glenn		Inyo		San Luis			
Humboldt		Kings		Obispo			
Lake		Madera		Santa Barbara			
Lassen		Mariposa		Santa Clara			
Marin		Merced		Santa Cruz			
Mendocino		Mono		Ventura			
Modoc		Placer					
Napa		San Francisco					
Nevada		San Joaquin					
Plumas		San Mateo					
Shasta		Stanislaus					
Sierra		Tulare					
Siskiyou		Tuolumne					
Solano		Yolo					
Sonoma							
Sutter							
Tehama							
Trinity							
Yuba							

Los Angeles County - Regions V and VI Definitions

Region V – Sandy Maeshiro
<u>Western Los Angeles County</u>

Acton-Agua Dulce
Alhambra City
Bellflower
Beverly Hills
Burbank
Castaic
Compton
Culver City
Downey
El Rancho
El Segundo
Garvey
Glendale
Gorman
Hawthorne
Hermosa Beach City
Hughes-Elizabeth Lakes
Inglewood
La Canada
Lancaster
Las Virgines
Lawndale
Lennox
Long Beach
Los Angeles
Lynwood
Manhattan Beach
Montebello
Mountain View
Newhall
Palos Verdes Peninsula
Palmdale
Paramount
Redondo Beach
Rowland
Santa Monica-Malibu
Saugus
Sulphur Springs
Torrance
Westside
Wilsona
Wiseburn

Region VI – Karen Zuk
<u>Eastern Los Angeles County</u>

ABC
Arcadia
Azusa
Baldwin Park
Bassett
Bonita
Charter Oak
Claremont
Covina Valley
Duarte
Eastside
East Whittier City
El Monte
Glendora
Hacienda La Puente
Keppel
Little Lake City
Los Nietos
Lowell Joint
Monrovia
Norwalk-La Mirada
Pasadena
Pomona
Rosemead
San Gabriel
San Marino
South Pasadena
South Whittier
Temple City
Valle Lindo
Walnut Valley
West Covina
Whittier City

NOTICE OF INTENT TO APPLY
EARLY MENTAL HEALTH INITIATIVE
REQUEST FOR APPLICATION
EMHI-2011

PLEASE COMPLETE ONE FORM FOR <u>EACH PROPOSED APPLICATION</u> TO BE SUBMITTED

COUNTY:_____ _____

LOCAL EDUCATION AGENCY (Name of District or County Office of Education):

_____

LIST THE SCHOOL SITES PROPOSED FOR THE PROGRAM FUNDED THROUGH EMHI:

☞If any of the listed school sites are operating an intervention program that is either currently or formerly funded by the Department of Mental Health through EMHI mark an "**X**" next to the school name.

1.	☐	7.	☐
2.	☐	8.	☐
3.	☐	9.	☐
4.	☐	10.	☐
5.	☐	11.	☐
6.	☐	12.	☐

Type of Proposed Application (Check One):

Primary Intervention Program (PIP)	
Other Model	
Other Model and PIP	
Enhanced PIP	
Enhanced Other Model	
Enhanced Other Model and PIP	

Will this application be for: Expansion of Services _____   Augmentation of Services _____

Did a representative from your district/county office of education attend one of the EMHI-2011 RFA Information Meetings? YES _____   NO _____

Contact Person:_____ _____

Email Address:_____ _____

Telephone Number:_____ _____

PLEASE SUBMIT THIS FORM BY <u>APRIL 1, 2011</u> to:
Grant Programs Management
1600 9th Street, Room 150
Sacramento, CA 95814
Or fax to (916) 654-2739

If you have any questions, please call (916) 651-3740.

C. SUBMISSION OF APPLICATIONS

1. Applicants must respond to all items specified as required in the RFA EMHI-2011. It is sometimes necessary to amend information or requirements after the release of an RFA. Periodically checking the DMH EMHI website for updates regarding the RFA EMHI-2011 is strongly recommended.
    http://www.dmh.ca.gov/Services_and_Programs/Children_and_Youth/EMHI.asp

2. No applications, or modifications and/or corrections to applications, will be allowed after the submission due date and time specified in this RFA. (Page ii)

3. APPLICATIONS MUST CONTAIN THE COMPLETED GRANT REQUEST FORM FURNISHED BY DMH. The Grant Request form must include an ORIGINAL signature. The information requested on the form must be printed in ink or typewritten. No erasures are permitted. Errors may be crossed out, corrections printed in ink or typewritten adjacent to the error, and initialed by the person signing the application. The maximum amount of funding awarded for one fiscal year will be the amount entered on the Grant Request form.

4. The Grant Request form must be completed, signed, and dated by the Local Education Agency (LEA) superintendent or his/her designee.

5. Applications must include all of the required forms as identified in the RFA EMHI-2011, and listed on Page 17, Step 6.

6. Applications must include the Certification of Assurance of Compliance with Welfare and Institutions Code Section 4380, and the Certification of Assurance of Compliance with Underserved/Underrepresented statistics. Both of the documents must be dated and signed with original signatures.

7. Applicants may not substitute any of the forms provided in the RFA EMHI-2011. The forms may be accessed through the DMH EMHI website at:
    http://www.dmh.ca.gov/Services_and_Programs/Children_and_Youth/EMHI.asp

8. An application may be rejected if DMH determines that irregularities warrant a finding of substantial noncompliance with the RFA requirements.

9. The state may waive any immaterial defect in an application (see definition on Page ix, Section E). The state's waiver of an immaterial defect shall in no way excuse the applicant from full compliance with the RFA if awarded the grant.

10. All applicants must submit a detailed Program Budget and Budget Justification. The Program Budget will become a part of the allocation document. Following the announcement of awards, DMH reserves the right to negotiate with successful applicants any aspect of the application deemed necessary by DMH to better achieve program goals. **An unwillingness to negotiate any aspect of the application shall be considered grounds for rejection of the application and cancellation of the award.**

11. The original application must be clearly labeled "original" and each of the three copies must be clearly labeled "copy". The original and each of the three required copies must be securely bound separately and enclosed in front and back covers. The front cover must clearly identify the applicant's name and the applicant's county. Electronic version (thumb drive or CD-R) must be clearly labeled with the name of LEA and securely attached in an envelope to the inside cover of the Original.

12. All application narrative portions, except tables and matrices, must be **double-spaced** (approximately three typed lines per inch). In addition to the automatic deduction, the reviewers will only read one-half of the pertinent application section if single-spacing (six lines or more per inch) is used, or two-thirds of the pertinent application section if 1.5 (4 lines per inch) spacing is used.

13. Each part of the application narrative may not exceed the maximum number of pages allowed per the instructions for each part. Pages must be numbered according to the instructions for each part of the application. Forms do not need to be numbered. Pages not used in one part of the application may not be used in another part of the application.

14. All parts of the application must present the information in the sequence requested, including the section and subsection headings (those that are bolded and underlined) that are used in the narrative instructions for each part. The application narratives are comprised of Characteristics of Applicant; Program Services and Staffing; Description of Supporting Research; and Grant Development and Support.

15. The font and size used in this RFA is Arial 12. **It is now a mandatory requirement of this and all future EMHI applications to use Arial 12 or Geneva 12.** With the exception of charts and matrices, the type size should be no smaller or narrower than the type used in this portion of the RFA. Charts and matrices should have a font size no smaller than Arial or Geneva 10. The margins must be at least one inch at the top and bottom of each page, one inch left margin (to allow for binding), and ½-inch right margin. Forms do not need to meet these margin requirements.

Failure to adhere to the Submission Requirements will result in a deduction of points or the disqualification of the application. Refer to Pages 4-5, Automatic Deductions, for further information.

D.   DISQUALIFICATION

Any one of the following shall result in the disqualification of an application or site(s) listed in the application:

1. Application not received at the location and time specified in the RFA (See Page 43).

2. Application not submitted in a sealed envelope/box, plainly marked with the applicant's name and return address, and clearly labeled **Department of Mental Health, EMHI Staff, Grant Programs Management Unit, 1600 9th Street, Room 150, Sacramento, CA 95814**, when such an omission results in a delayed opening of the application and compromises the integrity of the competitive process.

3. Any school site listed in the application that has previously been funded twice by EMHI for the same program service(s), beginning with EMHI grants initially funded in 2002-03 and all subsequent years, will be disqualified. If an application includes multiple school sites, only the sites that have been funded twice for the same services will be disqualified. If there is any question regarding whether or not a school site meets the definition for having had the same services as those being requested in the application, please consult with the Technical Assistant Consultant assigned to your area early in the application process.

4. Substantial lack of response to programmatic requirements.

5. Any application deemed not to be an original work product.

6. Any application that is submitted by an entity other than a LEA.

7. Any school site listed in the application will be disqualified if it is determined that the services proposed to be funded through EMHI would supplant existing services. The source of the funds is immaterial.

8. Any school site that will receive EMHI grant funds for a continuing program in fiscal year 2011-12 will be disqualified.

9. Any school site that was funded from any source of funds during fiscal year 2010-11 that is included in an application for the same services that were provided in the previous funding cycle will be disqualified, unless the application proposes an augmentation of the previously funded services.

E. IMMATERIAL DEFECT

An immaterial defect is a flaw, incompletion, defect, or condition in an application that may not warrant disqualification of the application. However, if an application is found to contain a substantial number of immaterial defects, it may be determined to be substantially noncompliant and will be rejected.

F. NOTIFICATION OF DISQUALIFICATION

During the initial DMH review process, if it is determined that a grant application meets the criteria for disqualification, DMH will notify the LEA by letter, and the grant application will be removed from the grant reading process.

The LEA may dispute the disqualification but it is the responsibility of the LEA to provide documentation to support their claim that the disqualification was incorrect. The LEA must follow these procedures:

1. A letter disputing the disqualification, with an original signature must be submitted by the LEA superintendent or his/her designee and **received** by DMH (not postmarked) no later than five (5) working days (excluding the first day and including the last day) from the date on the Notification of Disqualification Letter to the applicant. The only acceptable delivery method for a letter disputing the disqualification is by a postal service (United States Post Office, Federal Express, etc.). **The letter cannot be hand-delivered by the applicant, faxed, or sent by electronic mail. Any letter received without an original signature and/or by any delivery method other than a postal service will not be reviewed.**

The letter disputing the disqualification must be addressed and sent to:

California Department of Mental Health
EMHI-2011 Disqualification
Attention: EMHI Staff
Grant Programs Management Unit
1600 9th Street, Room 150
Sacramento, CA 95814

2. The LEA must describe in the letter the factors that caused the application to be incorrectly disqualified. The letter may not provide additional information that should have been included in the original application.

3. Upon receipt, the letter disputing the disqualification of the LEA's grant application will be evaluated by EMHI staff for substantial merit.

4. Based upon the evaluation of the letter disputing the disqualification of the LEA's grant application, DMH will either reinstate the application or confirm the disqualification and notify the applicant by letter. <u>All decisions are final.</u>

G. AWARD PROCESS

All applications will be reviewed by EMHI staff to determine if the requirements specified in the RFA were met.

All applications meeting the requirements will be submitted to an evaluation committee, which will evaluate and score the applications using the criteria specified in the RFA. In scoring an application, each individual component in the evaluation criteria will be weighed in the context of its contribution to the end product. All applications' evaluation scoring sheets will be available for public inspection at the conclusion of the evaluation committee scoring process and after the "Notification Letter—Intent to Award" list is posted.

<u>Grants will be awarded to applicants whose applications are given the highest scores by the evaluation committee in accordance with legislative requirements, DMH policies, and the availability of funds.</u>

On the date that awards are announced, a "Notification Letter—Intent to Award" list of all participating applicants and their scores will be posted in the Early Mental Health Initiative Program, Department of Mental Health, 1600 9th Street, Room 150, Sacramento, California. On the same date, a "Notification Letter—Intent to Award" letter will be mailed to all the superintendents of LEAs that submitted an awarded application, and a copy will be mailed to the designated Project Coordinator at the mailing address specified in the application. The posting of the "Notification Letter—Intent to Award" will also be announced on the DMH website at:
http://www.dmh.ca.gov/Services_and_Programs/Children_and_Youth/EMHI.asp

DMH shall inform applicants who 1) did not receive a passing score, OR 2) for whom there appears to be insufficient funds to award their application, by mailing the applicant a "Notification Letter—Did Not Pass" or a "Notification Letter —No Funds" letter. DMH may issue these two letters either simultaneously with or prior to the posting of the "Notification Letter—Intent to Award" list and letters. These "Did Not Pass/No Funds" letters will be mailed to the superintendents of the LEAs that submitted the application, and a copy will be mailed to the designated Project Coordinator at the mailing address specified in the application.

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EMHI-2011

REQUEST FOR APPLICATION
EARLY MENTAL HEALTH INITIATIVE
February 8, 2011

PROGRAM STATEMENT

I. INTRODUCTION AND PURPOSE OF PROGRAM

Chapter 757, Statutes of 1991, Assembly Bill (AB) 1650 (Hansen) authorized the School-Based Early Mental Health Intervention and Prevention Services for Children Act. This legislation permits the California Department of Mental Health (DMH) to award Early Mental Health Initiative (EMHI) matching grants to Local Education Agencies (LEAs) to implement early intervention programs to promote mental health. The target population of EMHI funded programs is students in kindergarten through third grades who have been identified as experiencing mild to moderate school adjustment difficulties. An LEA is defined as any publicly-funded school district, county office of education, or state special school. Matching grants are provided to LEAs to implement programs located in publicly-funded elementary schools for a three-year funding cycle. LEAs are required to provide at least 50 percent (50%) of the total proposed program costs.

During fiscal year 2010-11, DMH supported programs based at 415 school sites in 71 school districts.

The California Department of Education (CDE) also has a school-linked service program called Healthy Start. It represents an opportunity for K-12 schools to involve themselves in a comprehensive partnership to reform the current delivery of support services to students and their families. This is achieved by the formation of new partnerships between schools and health and human services agencies. Information can be obtained from the CDE at (916) 319-0914. An LEA may apply for and receive funding for both EMHI and Healthy Start programs.

A. BACKGROUND

Surveys nationwide have documented that at least 30 percent of all elementary school students experience moderate school adjustment difficulties. Research has shown that the behavior of children experiencing school adjustment difficulties is often detectable at an early age. A positive correlation exists between the following behaviors/attributes and later difficulties: lack of commitment to school; poor attendance; poor academic achievement; acting-out behavior; inability to make friends; excessively shy and/or withdrawn behavior; inability to cope with structure; and poor school bonding. As these children become older, they may receive services from public agencies because of substance abuse difficulties, teenage pregnancy, school dropout, delinquent behavior, and/or major mental health problems.

In recent years, it has been demonstrated that programs based on systematic early identification, backed by prompt and effective intervention, can prevent later adjustment difficulties at great savings to individuals, schools, mental health programs, and society.

The California DMH is committed to early mental health prevention and intervention and has funded and supported such programs since 1992.

B. GOALS

The goals of EMHI are to enhance the social and emotional development of young students; increase the likelihood that students experiencing mild to moderate school adjustment difficulties will succeed in school; increase personal competencies related to life success; and minimize the need for more intensive and costly services as they grow older. A number of early mental health intervention and prevention programs have proven to be successful.

By allocating matching fiscal support for the first three years, EMHI provides an opportunity for LEAs to collaborate with Cooperating Mental Health Entities, such as public or county mental health programs or private nonprofit agencies. The intent of this collaboration is to implement, expand, or modify school-based programs that enhance school adjustment, mental health, and social/emotional development of students and to integrate such services into the local school program schedule after the three-year funding cycle.

C. KEY ELEMENTS

EMHI emphasizes several **key elements** related to the implementation of school-based early mental health prevention and intervention programs. Programs funded through EMHI should*:*

- Serve students in kindergarten through third grade experiencing mild to moderate school adjustment difficulties.

- Provide services that are school-based and low cost.

- Provide services in a culturally competent manner.

- Provide services to appropriate students in the target population from low-income families.

- Provide services to appropriate students in the target population who are in out-of-home placement or are at-risk of out-of-home placement.

- Encourage the involvement of parents/guardians and teaching staff to build alliances to promote students' mental health and social/emotional development.

- Provide services in collaboration with a Cooperating Mental Health Entity such as a County Mental Health Department or a private non-profit agency*.*

- Use a systematic selection process of students most likely to benefit from program participation.

- Use alternative personnel, such as Child Aides, to provide direct services to students instead of licensed/credentialed staff. The primary focus of these grants is services, with the Child Aides providing direct services. School staff with a Pupil Personnel Services (PPS) credential provide supervision to the Child Aides, while both mental health and school professionals provide training to the Child Aides.

- Change the traditional roles of mental health professionals from direct service provision to providing supervision and training to the Child Aides.

- Provide ongoing supervision and training of Child Aides by school psychologists, school social workers, or school counselors (with a Pupil Personnel Services credential) in collaboration with professional staff of the Cooperating Mental Health Entities.

- Provide ongoing monitoring and evaluation of program services.

- Ensure implementation of programs that are based on adoption or modification, or both, of existing program services that have been shown to be effective and that are based on sound research.

D. PRIORITY FUNDING

The DMH, in an effort to address students who have been underserved or underrepresented during previous grant funding cycles, has mandated EMHI funds be prioritized for districts that have never been funded or have not been funded within the past ten years beginning with EMHI grants initially funded in 2002-03.

Section 4380 of the Welfare and Institution Code (Chapter 757, Statute 1991, Assembly Bill 1650) specifies that EMHI funds will be allocated to the LEA with the "greatest number of eligible pupils from low-income families".

LEAs that meet the two aforementioned criteria will be awarded up to a maximum of five points. Three points shall be awarded to LEAs that have never been funded or have not been funded within the past ten years beginning with EMHI grants initially funded in 2002-03.

LEAs that include school sites whose low income families **exceed** 85% Free and Reduced Lunch shall receive two additional points. If there are multiple sites included in the application at least 50% of the sites must meet the Free and Reduced Lunch criteria in order to receive the two points.

E. APPLICATION REVIEW AND SCORING

Applications will be evaluated by a team comprised of children's services specialists, DMH state staff and program professionals in the field. A minimum score of 70 out of 100 is required for consideration for funding. This team will use the EMHI-2011 APPLICATION SCORE SHEET (Pages 53-54) to rate each application on the following seven elements:

- Characteristics of Applicant (Maximum 10 points)

- Program Services (Maximum 30 points)

- Program Staffing (Maximum 15 points)

- Cultural Competency (Maximum 10 points)

- Program Budget (Maximum 20 points)

- Letters of Support (Maximum 5 points)

- Adherence to RFA instructions (Maximum 10 points)

1. In scoring the elements of an application, the team members will review and evaluate how well the application has addressed the following areas:

   a. Documentation of the need for prevention and intervention services and a description of the program goals.

   b. A viable plan to implement programs and services that are based on adoption, expansion, or modification of existing programs that have been shown to be effective based on documented research.

   c. Description of how the LEA will ensure services will be provided to students who qualify for EMHI funded services and who are from low-income families.

   d. A clear plan describing how the applicant will identify and consider for program services those students who are, or who are at risk of being, in out-of-home placement.

   e. A clear description of supportive services in collaboration with one or more Cooperating Mental Health Entities.

   f. A parent/guardian involvement component. An acceptable level of parent/guardian involvement is conducting a conference with the parent/guardian prior to, during, or upon a student's exit from participation in the program.

   g. Services that are culturally competent.

   h. Services that are provided at a low cost per child.

   i. An evaluation plan that includes quantitative and qualitative measures of school and pupil characteristics.

   j. A plan describing how the proposed services will be continued after the funding period.

2. Automatic Deductions

   "Adherence to RFA Instructions," item 7 on the score sheet, is worth a maximum of 10 points. Deductions may be made for various automatic deductions as noted below:

   a. Up to 10 points maximum may be deducted for any combination of the following <u>Major</u> automatic deductions:

       i. Omission of any required forms. Any form which needs to be signed by LEA superintendent or designee will be regarded as omitted if it is not signed. (5 points each)

           1. Grant Request form (if not signed by LEA Superintendent or designee this will be regarded as omitted)

           2. Program Summary form

           3. Program Budget form

           4. Budget Justification

           5. School Enrollment Information and Student Demographics Chart

6. Certification of Assurance of Compliance with Welfare and Institutions Code Section 4380 (j) (10) (if not signed by LEA Superintendent or designee this will be regarded as omitted)

7. Certification of Assurance of Compliance with Underserved/Underrepresented Statistics (if not signed by LEA Superintendent or designee this will be regarded as omitted)

ii. Major font size, margins, or spacing violations that appear to have significantly allowed the applicant to include more content in those sections of the RFA that have page limits. Please note requirements in Section C, #12 and #15 on Page viii - Submission of Applications. (Up to 10 points)

iii. Résumés for key professional staff.

iv. Failure to include an electronic copy (thumb drive or CD-R) of the grant application by the application due date.

b. **Up to 2 points may be deducted for any combination of the following <u>Minor</u> automatic deductions:**

i. Each separate copy of the application is not securely bound or does not have a front cover that identifies the applicant's name and county.

ii. The application is not assembled in the correct order according to the Checklist provided in the RFA.

iii. The application does not have all of the required (Bolded and Underlined) headings in the correct sequence in all narrative parts of the application (Characteristics of Applicant; Program Services and Staff; Description of Supporting Research; Grant Development and Support). A listing of all required headings is on Pages 62-63.

iv. Minor font size, margin, or spacing violations which do not appear, in the opinion of the reviewer, to have significantly allowed the applicant to include more information in the application. Note requirements in Section C, #12 and #15 on Page viii – Submission of Applications.

v. Omission of the Annual School Calendar.

vi. Omission of the school site maps indicating the location of activity room.

vii. Any required form that is <u>incomplete.</u>

c. A maximum 10 points may be deducted for any combination of major and minor automatic deductions.

d. Automatic deductions will be judged by an EMHI staff person or Technical Assistance Consultant prior to the formal evaluation and scoring of applications. The sheet that will be used for this scoring is in the RFA appendix on Page 58.

II. PROGRAM REQUIREMENTS

An LEA may implement, modify, or expand an early mental health prevention or intervention service/curricula. A list of program services/curricula with which DMH is familiar is listed on Page 30. If the LEA is proposing a program service/curricula not on this list, research documenting its effectiveness must be described per the instructions in: III. E. Description of Supporting Research on Page 30. The application must propose to implement the same services at each site listed in the application, whether they are grant funded or locally funded.

The proposed services must target kindergarten through third grade students who are exhibiting mild to moderate school adjustment difficulties. These difficulties may be displayed in behaviors such as shyness, withdrawal, aggressiveness, acting-out, poor school attendance, poor school achievement, or poor social bonding. Students who are currently experiencing situational stressors that are known to be closely related to future school adjustment difficulties may also be considered for program participation.

IMPORTANT! EMHI is not intended to meet the needs of "high-risk" students who require professional or ongoing intervention from school support staff or administrators. This Request for Application (RFA) is not to be considered for implementation or continuation of a therapy or treatment program, remedial education, or after-school care.

The primary recipient of services must be the student identified through a systematic selection process. The selection process should include a "team approach" and not rely solely on teacher classroom surveys. Services may be provided to an individual, a small group, or a combination of the two services. Direct services should be provided by alternative personnel, such as Child Aides, rather than licensed and/or credentialed staff. Direct services to students are offered during normal instructional hours.

A. APPLICATION TYPE, SERVICES AND CURRICULUM

1. Application Type– There are six types of applications that can be submitted for EMHI funding.

   The Program Summary form (Pages 47-48) requires that the application be identified as either a: 1) Primary Intervention Program (PIP), 2) Other Model, 3) Other Model and PIP, 4) Enhanced PIP, 5) Enhanced Other Model, or 6) Enhanced Other Model and PIP. The application type described in the application must meet all the requirements set forth in the legislation (Welfare and Institutions Codes Sections 4343-4352 and 4370-4390) and this RFA.

   Applicants are encouraged to contact a Technical Assistance Consultant (refer to Page iii) if assistance is needed in classifying the application type proposed for implementation.

   Welfare and Institutions Code (WIC) Section 4380 (h) (5) states "A minimum of 80 percent (80%) of the grants awarded by the director shall include the basic components of the Primary Intervention Program" (Page 45).

   Applications for funding for Other Model direct services that include PIP services as the local share of the matching grant in the Program Budget will meet the 80 percent (80%) requirement and should be classified as Other Model and PIP.

Applications that include locally funded PIP services as the local share of the matching grant to the proposed other direct services must clearly demonstrate how the PIP services will integrate with the other direct services in every aspect (students' needs, student selection process, program staffing, supervision and training, etc.).

2. Program Services - There are two categories of Program Services: a) Direct Services and b) Indirect Services.

   a. Direct Services

   Direct services are delivered in either an individual format, a small group (two to four students), or a combination of both, to selected students in the target population for a short, specified amount of time (typically once a week for twelve to fifteen weeks).

   Example 1 - Individual: PIP is an example of a direct service that uses a one-to-one nondirective play format exclusively throughout the duration of the services to students. In this case, the Application Type would be "PIP" and the Program Service would be "PIP."

   Example 2 - Group: An application may propose to implement direct services in a small group format that might utilize curricula that address social skills, anger management, friendship groups, or topic-specific adjustment issues such as divorce or grief. In this case, the Application Type would be "Other Model" and the Program Service would be "Small Groups" utilizing a specific evidence-based curriculum such as those listed on Page 30.

   Example 3: Another example of an Other Model would be two different types of direct services, such as small groups and one-to-one services that are not PIP services.

   Example 4: If an application proposes to implement small group services with EMHI funding and also uses the locally funded PIP services as match funding, this Application Type would be classified as an Other Model and PIP. Please note that if the locally funded direct services are not listed on Page 30 as a program service with which the DMH is familiar, the service would need to be discussed in III. E. Description of Supporting Research.

   Each school site listed in the application must deliver the same type of services, whether they are grant funded or locally funded. For example, an application proposes to implement small group services that address social skills development at four sites. The LEA proposes to use locally funded PIP services at three of the four sites as match to the grant funded group services. This is not acceptable. The application would need to also propose to fund PIP at the other site to result in all four sites implementing the same program services.

   Research to support the grant-funded direct services **not listed on Page 30 as a program service with which the DMH is familiar** must be included in III. E. Description of Supporting Research (see Page 30).

   Please contact an EMHI Technical Assistance Consultant or EMHI state staff if you have questions regarding the type of services that can be funded.

b. Indirect (Enhancement) Services

A program **enhancement** is a supportive service which is indirect, secondary in nature, and complements the direct service to selected students from the target population (identified K-3 students). An enhancement application must support a direct service, which may be either grant funded or locally funded. Indirect services are typically provided to school staff, parent/guardians, and/or classrooms. An enhancement application may include more than one type of indirect service; however, the same services, whether they are grant funded or locally funded, must be delivered at all sites listed in the application. Following are some examples of indirect service components:

- Services to parents/guardians of the target population might include parent education and/or support services, a parent resource center, parent outreach and/or family play nights.

- Services to school staff of the target population might include in-services and/or workshops on such topics as addressing the needs of students experiencing mild to moderate school adjustment difficulties; managing classroom behavior; teaching social skills; establishing positive relationships with parents/guardians, and consultation with a mental health professional regarding the needs of students.

- Services to students in kindergarten through third grade classrooms might include topic specific curriculums, such as social skills, anger management, and/or violence prevention. These services must complement the direct services delivered to selected students in the target population.

An application that includes any indirect service as part of a direct service program is considered to be an enhancement. THERE IS A COMBINATION OF FUNDING ARRANGEMENTS POSSIBLE IN THIS SITUATION.

1) An applicant may apply for grant funding for a direct service and an indirect service in the same application**.**

2) An applicant may apply for only the indirect services from grant funding (with the direct service which it supports being funded by local funds). In this case, the locally funded direct service must be maintained at the level described in the application for the three-year funding cycle of the grant in order to collect the grant funds for the indirect service. Also note this requirement in II.F.2 and III.D.1(c).

3) An application for enhancement services must be identified as "Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP" on the Program Summary form (Pages 47-48).

Example 1: An application proposes to implement a Primary Intervention Program (PIP) and an education and support group for the parents/guardians of the students served in PIP. This application must be identified as an "Enhanced PIP," and the research to support the parent education and support groups must be included in the application.

Example 2: An application proposes to implement a social skills curriculum to be delivered by the classroom teacher. EMHI will provide funding to train the classroom teachers regarding how to conduct the social skills curriculum. The LEA is proposing to use their locally funded PIP as match. This application must be identified as an "Enhanced PIP" because the classroom services are considered an indirect service to the locally funded direct services program (PIP). The research to support classroom curriculum for social skills must be included in the application.

Small group services (2-4 students) are considered to be direct services (refer to Page 7) and are not enhancement services to another direct services component.

3. Program Curriculum

There are many research-based curricula that can be implemented with EMHI funding. The application types funded through EMHI are broadly classified, based upon the general services to be provided to the target population.

The research to support the use of any curricula for grant funded indirect services **not listed on Page 30 as a program service with which the DMH is familiar** must be included in III. E. Description of Supporting Research (see Page 30).

B. EXPANSION OF EXISTING SERVICES

An LEA may expand EMHI funded services to other school sites within the LEA. Expansion of services is defined as the implementation of a service currently being operated within the LEA, which has been or is currently funded through EMHI <u>or local funds</u> to other sites within the LEA. This section is not applicable to LEAs with a total K-3 population of 150,000 or more.

C. AUGMENTATION OF SERVICES

Augmentation of services is defined as increasing the level of services (staff/hours) at a school site above the level provided during 2010-11. With an augmentation, an LEA may increase the level of services at a school site that was previously funded through EMHI or any other funding source. In order to augment services, the level of services provided during 2010-11 must be maintained with local funds for the entire three years of the proposed EMHI grant. An augmentation funded by an EMHI grant may only provide services above and beyond the level provided during 2010-11. The services provided during 2010-11 must be described in the **Program Services and Staffing** section, as well as in the LEA and/or Other Match categories of the budget. If the augmented services are not maintained at the level proposed in the application for the duration of the grant, the requested funding will be considered to be supplanting current funding and services.

Note: Expansion and Augmentation of services are **NOT** application types.

D. ELIGIBILITY

An eligible applicant is an LEA, which is defined as a publicly funded school district, county office of education, or state special school. All programs supported under the terms of this RFA must be based at a public school site and must focus on services to students in kindergarten through third grade in the target population who attend publicly funded elementary schools.

Once the grant is awarded, the school sites specified in the application may not be changed for any reason. The approved program services may not be changed or modified without prior approval from DMH.

School sites that will receive EMHI grant funds for continuing programs in fiscal year 2011-12 are not eligible to receive additional funds and cannot be included as a proposed site in the application.

School sites with operational program services in fiscal year 2010-11 may not apply for funding for the same services in fiscal year 2011-12, unless the services are proposed to be augmented (refer to Page 22, Augmentation of Previously Funded Services).

After a three-year funding cycle, LEAs are expected to maintain the program services with local funding. <u>LEAs may NOT receive EMHI funding for the same program service at the same site(s) more than two three-year contract periods, beginning with EMHI grants initially funded in 2002-03</u>.

1. **School Districts**

    The amount of grant funding and number of school sites for which school districts may apply is based upon the number of **kindergarten through third grade** students enrolled in the LEA. The table on **Page 11** specifies the maximum amount of funds and number of sites that may be included for each LEA.

    School districts that are included in an application submitted by their County Office of Education (COE) or a joint application are precluded from submitting any other EMHI application.

2. **Charter Schools**

    All charter schools must apply for EMHI funded grants through their charter granting agency or school district of geographic location. The application would be treated as an application by the chartering authority or school district of geographic location.

3. **Joint Applications**

    A joint application may be submitted by a maximum of <u>three school districts</u>. The maximum grant request for a Joint Application is based upon the total K-3 enrollment of the districts represented in the application. It is required that one district assume all responsibility for fiscal and administrative matters. The Project Coordinator must be employed by the designated district.

    School districts that are included in a joint application are precluded from submitting any other EMHI application.

4. **County Office of Education (COE) Consortium Applications**

    DMH allows school districts in the same county, with the coordination and assistance of the county offices of education, to form a consortium to apply for EMHI grants.

Establishing a consortium promotes economy of scale and avoids duplication of effort. It also allows districts to pool expertise and resources. The maximum grant request for a consortium application is based upon the total K-3 enrollment of the districts represented in the application as indicated in the table on Page 11. A single school district in the consortium application may have a maximum of four school sites. The COE must submit the grant application on behalf of a consortium, become the grant recipient, and assume the fiscal and administrative responsibilities, including the function of program coordination.

A COE may apply for multiple grants. A combined total of 5 districts and 8 sites may be included in all grants submitted by the COE.

A COE may submit multiple applications for the same program services, provided the districts in each application are unique. School districts that are included in an application submitted by the COE are precluded from submitting any other EMHI application.

5. **Eligibility Requirements**

The table below indicates the ***maximum TOTAL grant request and number of sites that can be included in all applications submitted by an LEA, <u>based on K-3 enrollment</u>.*** Note that while the maximum grant request for any school site is $42,000, LEAs may choose to utilize less than $42,000 per site in order to fund services at additional sites up to the maximum number of sites indicated in the table. The table also indicates the maximum number of application types that may be submitted by the LEA.

TABLE 1 – K-3 Enrollment and Maximum Grant Request

<u>K-3 Enrollment</u>	**Maximum LEA <u>request</u>**	**Maximum number of sites**	**Maximum number of applications of each application type per LEA**
150,000+	$504,000	16	6
30,000 – 149,999	$336,000	12	3
16,000 – 29,999	$210,000	10	1
3,000 – 15,999	$168,000	8	1
1 – 2,999	$84,000	6	1

a. A school site may not be included in more than one grant application.

b. An LEA with K-3 enrollment of less than 30,000 may submit only one of **each** type of application (PIP, Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, Enhanced Other Model and PIP) per school district.

LEAs with K-3 enrollment of 30,000 to 149,999 may submit up to three of each type of application.

LEAs with K-3 enrollment of 150,000 or more may submit up to six of each type of application.

Example: An LEA with K-3 enrollment of 5,000 students submits an Enhanced PIP application for two sites and another Enhanced PIP application for two additional sites within the same district and proposes to provide different enhancement services in each application. This is not acceptable. An LEA with 5,000 K-3 students may only submit one Enhanced PIP application that proposes to provide the same services at all four sites.

This requirement includes applications submitted by school districts and COEs in the same county.

c. An LEA may apply for grant funding for only one application type per application. The same program services must be included at each site in the application.

Example: An application proposes to implement PIP at two school sites listed in the application. The application also proposes to implement PIP and parent education services (enhancement services) at a third school site listed in the application. This would not be acceptable. All three school sites included in a single application must implement the same services, including any services used as local match.

E. COOPERATING MENTAL HEALTH ENTITY

A Cooperating Mental Health Entity is any federal, state, county, or private nonprofit agency that collaborates with the LEA in providing ongoing services. The application must clearly describe the cooperating entity's active role in the implementation of the program. Mental health services may be obtained from a cooperating entity through an interagency agreement or a subcontract between the applicant and the cooperating entity. Applicants may collaborate with more than one cooperating entity.

The Cooperating Mental Health Entity shall be responsible for providing a licensed (LMFT, LCSW, PhD) Mental Health Consultant (MHC) to assist the LEA with program implementation. Services may include, but are not limited to, screening students beyond the scope of EMHI, supervision and training.

A cooperating entity must include a letter in the application confirming its participation in, and support of, the provision of collaborative services. Also, a letter from at least one cooperating entity must confirm its agreement to screen referrals of low-income students determined to be in need of mental health treatment services that are beyond the scope of the EMHI funded program. In this letter, the cooperating entity must also agree to facilitate linkages to resources for these students. Services provided to students whose needs are beyond the scope of EMHI may not be included in the application or Program Budget (grant request or match).

Applicants may collaborate with more than one cooperating entity. The intent of this collaboration is to implement, expand, or modify school-based programs that enhance school adjustment, mental health, and social/emotional development of students and to integrate such services into the local school program schedule after the three-year funding cycle.

F. CULTURAL COMPETENCY

Culture is recognized as a predominant force in shaping behaviors, values, and decision making. DMH requires that EMHI applicants provide evidence of cultural competency **throughout** their applications. Cultural competency is defined as a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals, which enable them to work effectively in cross-cultural situations.

A culturally competent system of care acknowledges and incorporates on all levels the importance of culture, the assessment of cross-cultural relations, the vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge, and the adaptation of services to meet the needs of the culturally and linguistically diverse community. Cultural competency is not solely the recognition and understanding of race, language, and ethnicity, but of thoughts, communications, customs, beliefs, values, socioeconomics, and acculturation of racial, ethnic, religious, or social groups.

Applications will be scored on this criterion based upon how well cultural competency is addressed **throughout** the application.

G. FUNDING

Approximately $4.6 million will be available to fund new programs during fiscal year 2011-12. Eligible applicants are LEAs, which are defined as publicly funded county offices of education (COE), school districts, and state special schools. Grant amounts will vary depending on the program and population of the school site where the services are provided. Grant costs may also vary based on the differences in labor and operating costs in the various urban and rural school districts in California. The fiscal year maximum funding available for each year per school site is $42,000. The maximum grant request is based upon enrollment of kindergarten to third (K-3) students, and can be found in Table 1, Page 11 of this document. In fiscal year 2010-11, DMH funded approximately $15.0 million in grants for EMHI programs, and the average grant per school was approximately $34,000.

In accordance with the provisions of EMHI, the total requested state grant dollars cannot exceed 50 percent (50%) of the TOTAL (total equaling Grant Request plus LEA match plus other match) program cost. The total state grant funds requested must be matched by local (LEA plus Other) matching funds for each year of the funding cycle. The total state grant funds requested for any given year in the funding cycle cannot exceed the total amount of local matching funds. Local matching funds can be a combination of school district and cooperating entity cash and in-kind services. For example, if the application requests an annual amount of $126,000 of state grant funds, then local matching of at least an annual amount of $126,000 of cash or in-kind services must be identified between LEA Match and Other Match. Failure to identify sufficient local matching funds will lead to points being deducted in the scoring process and a reduction of the funding requested amount if funded.

The state reserves the right to negotiate the redistribution of costs within the Program Budget to better achieve program goals. **An unwillingness to negotiate any aspect of the application shall be considered grounds for rejection of the application.**

1. How Funding May Be Used

EMHI funding may be used to support the cost of staff, including professionals and Child Aides directly involved in the program and for various operating expenses and equipment as detailed in IV. Program Budget Preparation Instructions (Page 33). <u>Grant funding may not be utilized for electronic equipment over $500.</u>

For example, a grantee (LEA) may use grant funds to:

- Hire a new professional staff person or reallocate time of an existing professional staff person to coordinate and supervise the program.

- Hire Child Aides to work individually or in small groups with students who have been identified as having school adjustment difficulties.

- Contract with a cooperating entity.

- Provide specific in-depth training and support to teachers, school staff, and parents/guardians related to the goals of the program.

- Provide teacher release time for activities specifically related to meeting the program goals.

- Provide supplies and materials needed to support program implementation and services.

- Provide training and reimbursement of travel expenses, as appropriate for <u>mandatory</u> EMHI meetings and conferences for program staff, as noted in IV. Program Budget Preparation Instructions (Page 33).   EMHI funds cannot be used for reimbursement of out-of-state travel.

NOTE: GRANT FUNDED SERVICES MAY NOT BE USED TO SUPPLANT EXISTING SERVICES. AN EXISTING SERVICE IS <u>ANY</u> SERVICE (FROM ANY SOURCE OF FUNDS) BEING PROVIDED AT THE TIME THE APPLICATION IS WRITTEN AND SUBMITTED TO DMH BY THE APPLICANT, OR THAT WAS PROVIDED IN FISCAL YEAR 2010-11.

AN AUTHORIZED REPRESENTATIVE OF THE LEA MUST CERTIFY THAT EMHI FUNDS WILL NOT SUPPLANT EXISTING SERVICES OR FUNDS. A CERTIFICATION FORM FOR THIS PURPOSE IS INCLUDED IN THIS PACKAGE ON PAGE 55. THE CERTIFICATION MUST BE DATED AND SIGNED WITH AN ORIGINAL SIGNATURE.

Any cost incurred by the applicant related to the development and submission of the application MAY NOT be included in the Program Budget, either as the local share of the match or in the Grant Request. Such costs may include, but are not limited to, travel costs incurred by attending the RFA Information Meeting and/or personnel costs (including the cost of grant writers) incurred in the planning and development of the application.

DMH will consider the grantee to be the sole point of contact with regard to all fiscal matters related to the grant award, unless a designee has been named in accordance with provisions described on Page viii, # 4. The Project Coordinator designated by the LEA in the grant will be considered the contact person for issues relating to the grant award.

2. Future State and Local Funding Prospects

With any state funded program, future funding is determined by the level of funding dedicated to the program in the annual State Budget. It is advisable to contact DMH EMHI staff prior to implementing program services or hiring staff to verify the approved school sites and the total program allocation.

Development of permanent local funding sources must be a primary goal of the LEA regardless of the availability of state grants. Applicants must submit a plan proposing how they will assume the total costs to continue the program beyond the three-year grant period. LEAs may not receive EMHI funding more than two three-year contract periods, beginning with EMHI grants initially funded in 2002-03 for the same program service at any school site.

H. DATA COLLECTION AND PROGRAM REPORTING REQUIREMENTS

Statute requires an overall statewide evaluation that includes requirements for local data collection.

1. Data Collection

Grantees are required to keep records that will provide information necessary to evaluate the effectiveness of the program.

All LEAs must participate in the statewide data collection system. **The fee for fiscal year 2011-12 is <u>estimated</u> to be $800 per school site and must be included in the Program Budget as part of the Grant Request.** This amount may be modified, depending upon the results of the contract for data evaluation services. DMH reserves the right to negotiate the applicant's Program Budget to cover the actual cost of data collection.

2. Program Reporting Requirements

EMHI also requires grantees to submit periodic reports to the DMH that may include:

a. An evaluation of the effectiveness of the LEA in achieving stated goals.

b. A description of the problems encountered in the design and operation of the program including, but not limited to, identification of any policies or procedures that impeded program implementation.

c. The number of eligible pupils served by the program.

d. The number of eligible pupils who have not been served.

e. An evaluation of the impact of the program on the LEA and on the students completing the program, in the following areas:

- Learning behaviors
- Attendance
- School adjustment
- School-related competencies

f. An accounting of local budget savings resulting from implementation of the program, either current or anticipated.

g. A plan for continuing services after state funds cease. This plan should specify potential Cooperating Mental Health Entities that will assist in providing the necessary funds and/or services.

I. NOTICE OF INTENT TO APPLY

Please complete the Notice of Intent to Apply and submit by **April 1, 2011** to:

Grant Programs Management
1600 9th Street, Room 150
Sacramento, CA 95814
Or fax to (916) 654-2739

J. STEPS IN PREPARING THIS APPLICATION

Step 1   Complete the Notice of Intent to Apply, Page vi, by April 1, 2011 and submit to:

Grant Programs Management
1600 9th Street, Room 150
Sacramento, CA 95814
Or fax to (916) 654-2739

Step 2   Complete Characteristics of Applicant in accordance with instructions beginning on Page 18.

Step 3   Complete Program Services and Staffing in accordance with instructions beginning on Page 19.

Step 4   Complete Description of Supporting Research in accordance with the instructions on Page 30.

Step 5   Complete Grant Development and Support in accordance with instructions beginning on Page 31.

Step 6   Complete the required forms: Grant Request form, Program Budget and Budget Justification, Program Summary, School Enrollment Information and Student Demographics Chart, and the two Certifications of Assurance of Compliance.

Step 7   Review the entire application to ensure that the Grant Request form is signed, all required information is present, and that all data and figures are consistent throughout the application.

Step 8   Using the Application Checklist, Page 43, make sure that all documents are enclosed and collated in the order specified.

Step 9   Make three copies and securely bind each copy of the application with front and back covers. The original application must be clearly labeled "Original" and the copies labeled "Copy". The front cover must identify the applicant, the county in which applicant is located, and be titled: "EMHI-2011, Department of Mental Health - Early Mental Health Initiative RFA."

Step 10   The Original and three copies as well as the electronic copy (per the instructions on Page viii, #11) must be received by DMH no later than **5:00 p.m**. on **May 9, 2011**. Applications received after 5:00 p.m. on this date will be automatically disqualified. Applications may be mailed, shipped, or hand delivered to DMH, but may not be faxed or sent electronically.

III. APPLICATION REQUIREMENTS

A. **General Guidelines**

Substance and clarity of presentation will add to the strength of the application and are more important than length.

Programs funded through EMHI must implement, expand, or modify research-based program services that enhance school adjustment, mental health, and social/emotional development of students in the target population. Cultural competency, as defined on Page 13, must be woven throughout the proposed services and staffing described in the application narrative.

NOTE: AN LEA MAY APPLY FOR ONLY ONE APPLICATION TYPE PER APPLICATION (Page 11). The same program services must be included at each site in the application. The application (with the exception of all required forms, Program Budget and Budget Justification, letters of support, and résumé) consists of four narrative parts as follows:

- **Characteristics of Applicant**
- **Program Services and Staffing**
- **Description of Supporting Research**
- **Grant Development and Support**

The page limitations and pagination requirements are explained in the instructions for each of the parts. Applicants must respond to all sections and subsections, using the specific section (bold type) and subsection (underlined) headings for each part of the application in the presented order. If a section or subsection does not apply, the heading must still be included in the application with the notation "does not apply" immediately following. Refer to the Application Checklist on Page 43 for placement of each part and all documents in the application.

B. **Characteristics of Applicant**

Begin on a separate page titled **Characteristics of Applicant**. This narrative is limited to no more than ten (10) numbered, double-spaced pages for applicants including up to four school sites in the application. For applicants applying for five sites or more, or consortium grants or joint applications, one additional page may be added for each additional LEA or site up to a maximum of fifteen (15) pages. Pages must be numbered starting with Page 1. Pages not utilized in this narrative MAY NOT be used for any other narrative. Using the underlined section headings, respond to the following criteria:

1. Community Level

    Briefly describe the culture, characteristics and demographics of the community in which the school sites are located. Include relevant community profiles that would help describe your unique community needs and resources.

2. District Level

    Describe the demographics of the school district, including the size, location, number and type of schools, and any significant changes recently occurring or anticipated that have impacted or will impact the participating school sites (such as class size reduction

or increase). Consortiums must include a description of all school districts listed in the application.

3. <u>Site Level</u> - For each site listed in this application:

   a. Describe the demographics of each school site, including the unique characteristics, and socioeconomic factors of the student population and challenges they may face. Indicate the percentage of pupils from low-income families.

   b. List special services available on site for students, including those students who have school adjustment difficulties and any anticipated changes in the level of such services. This information may be provided in chart or matrix format.

   c. Identify the sites listed in the application that are currently or were previously funded through EMHI for any application type beginning with EMHI grants initially funded in 2002-03, the years the sites were funded, and the years the services were maintained with local funding. If discontinued, briefly explain why. Briefly describe the application type, the services and curriculum (if appropriate), the level of services (number of Child Aides and hours per week) when the services were supported through EMHI funding, and what the level of services is at the time this application is submitted to DMH. This information may be provided in table format.

NOTE: Information presented in matrix or chart format in response to items b. and c. may be single-spaced. Charts and matrices should have a font size no smaller than Arial or Geneva 10.

   d. Indicate whether the proposed sites are on a traditional, modified traditional, or year-round schedule. Include a copy of the Annual School Calendar(s) immediately after Characteristics of Applicant. The calendar(s) are not counted in the page limit.

   e. Insert school site maps indicating the location of the activity room immediately after the annual school calendar. The maps are not counted in the page limit.

Complete the School Enrollment Information and Student Demographics Chart and include in the application directly after Budget Justification. The chart can be found on Page 52 and is a helpful visual reference point for the RFA reviewers. This chart is not counted in the page limit.

C. **Program Services and Staffing**

Begin on a separate page titled **Program Services and Staffing**. This narrative is limited to twenty-five (25) double-spaced pages. For applicants applying for five sites or more, or consortium grants or joint applications, two additional pages may be added for a maximum of twenty-seven (27) pages. Pages must be numbered starting with Page 1. Pages not used in any other section may not be used for this section. Refer to Section C, #12 and #15 on Page viii for spacing, margin, and format requirements.

To complete this narrative, respond to Sections 1 and 2 below. Please take into consideration that some headings may request overlapping information. **Applicants must respond to ALL sections and use the specific underlined or bolded section and subsection headings in the order given.** If a section and/or subsection is not applicable, the section and/or subsection heading must be included in the application with a notation that indicates the section "does not apply".

Appendices <u>may not</u> be used to provide information that is required to be in the application narrative. Appendices may be used to support information that has been provided in the application.

Using the following **bold** headings and <u>underlined</u> subheadings, respond in detail to the following criterion:

1. **Program Services**

    a. <u>Description of Proposed Application Type, Program Services, and Student Needs</u>

        (1) Indicate the application type (PIP, Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP). Provide the name of the proposed program service (i.e., PIP, Second Step, Children of Divorce, etc.,) and describe the goals and requirements of the program service, as understood by the applicant.

        (2) Describe in detail the specific needs/problems of the students in the target population at the sites listed in this application, how these were identified, and how the proposed services will address these needs.

        (3) Describe how the proposed services will promote improvement in at least one of the following four areas included in the program evaluation:

            • Learning behaviors

            • Attendance

            • School Adjustment

            • School-related competencies

    b. <u>Direct Services</u>

        All applicants must respond to the Direct Services criteria. This includes applicants that have locally funded direct services at the school sites listed in the application. If the applicant is proposing to implement a core PIP program, the only services delivered to students will be one-to-one, nondirective play.

        All descriptions of services must show how they are culturally and linguistically appropriate for students in the target population.

        <u>Grant Funded Direct Services</u>

            (1) Describe in detail the direct services to be delivered to selected students (individual and/or group).

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(2) Describe who will deliver the services (level of staffing), the frequency of services (days per week, hours per day, length of sessions), and where the services will occur.

(3) Describe how the proposed services will integrate with any locally funded services described in the following section. If this application proposes to implement two direct services with grant funds, describe how they will integrate with each other.

<u>Locally Funded Direct Services</u>

Respond to this section if locally funded direct services at the school sites listed in this application will be used as the local share of the matching grant. Locally funded direct services not listed on Page 30 as a program service with which the DMH is familiar must be discussed in III. E. Description of Supporting Research to be used as match in the Program Budget.

(1) Describe in detail the direct services currently being delivered to selected students.

(2) Describe who is delivering the services (level of staffing), the frequency of services (days per week and hours per day), length of sessions and where the services occur.

(3) If the level of locally funded services will be reduced in the next school year, please indicate what the proposed level of services (staffing and frequency) will be and the reason(s) for the reduction.

c. <u>Indirect Services (Enhancements)</u>

This part must be completed if the application is for grant funded indirect services that will complement either locally funded or grant funded direct services to identified students (ex: parent support groups, family play nights, teacher training). **All indirect services** must be supported by research, and that research must be described in III. E. Description of Supporting Research if it is not listed on Page 30 as a program service with which the DMH is familiar.

All descriptions of indirect services must show how they are culturally and linguistically appropriate for students in the target population, parents/ guardians, and/or teachers.

Please note that if the locally funded direct service is not listed on Page 30 as a program service with which the DMH is familiar, it must also be discussed in III. E. Description of Supporting Research in order to be used as the local share of match in an enhancement application for grant funded services, and must be maintained for the three-year grant period.

(1) Describe in detail the specific proposed indirect services that will support the direct services that were described in the previous section, <u>Direct Services</u>.

(2) Describe who will provide the services, where the services will be offered, and the frequency of the services.

(3)　Describe in detail how the indirect services program will complement and integrate with the direct service program described in the previous section, Direct Services.

(4)　Describe the proposed level of staffing for the indirect service component (number of staff and hours per week each staff devotes to the program).

(5)　If applicable, describe any locally funded indirect services that will be used as part of the local match. Indicate how these services will integrate with the grant funded indirect services.

d.　Expansion Services

If this application is for expansion of EMHI funded services or locally funded services to other sites within the LEA, respond to the following criteria.

(1)　List the school sites currently implementing the services and include the funding sources (locally funded or EMHI). This information may be presented in chart form.

(2)　Describe how the proposed expansion services will integrate with the existing program currently being operated by the LEA.

e.　Augmentation of Previously Funded Services

If this application proposes to increase the level of services that are currently funded during 2010-11, with EMHI or other funding sources, at any school sites listed in this application, respond to the following criteria.

(1)　Describe the current level and the proposed level of staffing at the school site(s) named in the application (number of staff and hours per week each staff devotes to the program).

(2)　If there was a reduction in the level of staffing after a previous three-year EMHI grant ended, explain the amount of the reduction, the reason(s) for the reduction, how long the reduction has been in place, and how the proposed augmentation of services is not supplanting local funding or services. Refer to the "NOTE" on Page 14 regarding supplant issues.

f.　Systematic Selection Process

The selection process should include a "team approach" led by the Pupil Personnel Services credentialed EMHI professional staff and should not rely solely on teacher classroom surveys. As noted on Page 27, the School Based Mental Health Professional will have the primary responsibility to facilitate the student selection process. If the application proposes to operate more than one type of direct service, even if one of the direct services is locally funded, the method and criteria that will be used to determine which type of service the student will receive must be described in this section. Please note that all programs are required, at a minimum, to use the Walker Screening Instrument (WSI) to screen all first graders as one element of the systematic selection and program evaluation process. The use of this instrument shall be in cooperation with the independent data evaluator used in the EMHI program.

Applicants should discuss the role of the WSI results in their systematic selection process. DMH reserves the right to choose another screening or alter the requirements of the statewide evaluation as necessary.

(1) Describe the method used to select students for participation in **all** program services.

(2) Indicate the approximate number of students who will be served during the school year and provide the formula showing how the number of students was determined. Refer to Page 29 for information on how to determine the number of students to be served.

For **augmentation** and/or **enhancement** (indirect) services at a locally funded school site:

(3) Provide the number of students currently being served by the locally funded site(s) and the approximate number of students that will be served through the augmented and/or enhancement services.

(4) Provide the formula showing how the number of students was determined.

(5) If this application is for enhancement services to parents/guardians and/or teachers, provide the number of parents/teachers that will receive the enhancement services and the formula used to determine this number.

g. Out-of-Home Placement

A student who is not living with at least one biological or adoptive parent, is considered to be in an out-of-home placement. The following information is important, since out-of-home placement has been identified as one risk factor for future adjustment difficulties.

(1) Describe what efforts will be made to identify students who are in out-of-home placement or who are at risk of being in out-of-home placement.

(2) Describe how the LEA will ensure that these students are considered for EMHI funded program services.

h. Parent Notification and Approval

Describe methods by which parents/guardians will be informed of the program and how written permission will be secured prior to the student's participation in program services. Explain how language and ethnic/cultural needs with multi-cultural parents/guardians will be met.

Typically teachers initiate the first contact with the parents/guardians to explain the program and how participation will benefit their child.

i. Parent Involvement

Describe how parents/guardians will be involved in the program. An acceptable level of involvement is a parent conference conducted by EMHI professional staff prior to, during, or upon a student exiting from participation in the program services.

If this application includes indirect services to parents/guardians, describe how parents/guardians will be encouraged to participate in the proposed services. Describe how the indirect services will be culturally and linguistically appropriate for the parents/guardians targeted for the services.

j. Training and Supervision

Ongoing supervision of Child Aides must be provided by a school psychologist, school counselor, or school social worker with a Pupil Personnel Services (PPS) credential. A minimum of two hours per week of training and supervision (individual and group) per site is required for the successful operation of program services. Training may also be provided by the cooperating entity.

Describe the plan for training ("teaching" skills and concepts) and supervision (overseeing the performance and reviewing student progress) of Child Aides. Describe how the training topics will be culturally relevant for the target population to be served. If some training and/or supervision will be in conjunction with other EMHI funded or locally funded sites, include this information in the description of the supervision and training plan. The plan should identify which program staff (i.e., the Project Coordinator, School Based Mental Health Professional, Mental Health Consultant, and/or others) will conduct the training and supervision. Information described here should match the information on the Program Summary form (Pages 47-48).

k. The Cooperating Mental Health Entity

Identify the Cooperating Mental Health Entity and describe its role in the program. Describe the process to be used by the LEA and the cooperating entity for referring the student and family to the appropriate public and/or private community services when the student's needs are beyond the scope and purpose of the program. Indicate how the need for such referrals will be determined. The Cooperating Mental Health Entity shall be responsible for providing a licensed Mental Health Consultant (LMFT, LCSW, PhD) to assist the LEA with program implementation tasks that may include, but are not limited to, screening students beyond the scope of EMHI, supervision and training. Indicate how the Mental Health Consultant will be involved.

l. Space

It is suggested that the space designated for the activity room be no smaller than eighty (80) square feet. The designated confidential space must ensure that students and staff can meet without the concern of being overheard and must provide a sense of privacy from constant visual observation by other students and staff. Designated space must be appropriate for the program services described in the application including such considerations as meeting areas, desk space for staff, locking files, and telephone access for personnel. Respond to the following prompts:

(1) Describe in detail the specific space to be utilized for the program. Include information about the location on each school campus, room dimensions, square footage, and the location of entrances that access the room.

(2) Address such issues as security, safety, confidentiality, and the extent to which this space is dedicated for use by the program.

(3) If the proposed space will be shared with another program/activity, indicate who will be sharing the space and how the scheduling of EMHI funded services will be addressed to ensure confidentiality of services.

(4) If two (2) or more Child Aides will share one activity room, describe how they will be scheduled to ensure that only one child aide is occupying the activity room at any time during program activities.

(5) Describe how the supplies for the EMHI funded services will be safely stored on a daily basis and who will be responsible for their security.

Simultaneous program activities in the same room (space) are discouraged.

NOTE: Once activity room space is approved by DMH, any change during the grant period must be requested in writing and approved by DMH prior to the change. Under no circumstances may EMHI funded program services relocate to school sites other than the school sites named in the application.

m. Healthy Start

If an LEA is applying for, or currently receiving, a Healthy Start operational grant at the school site(s) named in this application, describe how the EMHI funded program will coordinate and interface with the Healthy Start program to avoid duplication of services.

n. Program Evaluation

All grantees are required to participate in the statewide evaluation. If you are only participating in the statewide evaluation, you are not required to complete this section. You must state that this section "Does not apply". **The fee for fiscal year 2011-12 is estimated to be $800 per school site and must be included in the Program Budget as part of the Grant Request.**

A local (in-house) program evaluation is optional. A maximum of $400 per school site, which may be either grant funds or match, may be spent on this component.

One focus of a local (in-house) evaluation must be the school adjustment of students who receive program services. If the LEA proposes to conduct a local program evaluation, the evaluation results must be submitted to DMH within 90 days of the end of each fiscal year unless other arrangements are made by the Project Coordinator with DMH. If your application includes funds for local (in-house) evaluation, it is important that you indicate this fact and address the following items:

(1) Describe proposed methods for evaluating effectiveness of the program other than reports required by the DMH and/or participation in the statewide data collection system (Page 15, Data Collection and Program Reporting Requirements). Identify any indicators that will be utilized.

(2) Identify who will do the local evaluation and the steps involved in accomplishing this task.

(3) Describe how the local program evaluation will address local issues and concerns that the program services were designed to alleviate and how the results of a local program evaluation will be used.

o. Program Continuation

By allocating matching fiscal support for the first three years, EMHI provides an opportunity for LEAs to collaborate with Cooperating Mental Health Entities, such as public or county mental health programs, private nonprofit agencies, community service organizations and even local businesses. The intent of this collaboration is to implement, expand, or modify school-based programs that enhance school adjustment, mental health, and social/emotional development of students and to integrate such services into the local school program schedule after the three-year funding cycle.

Describe plans for the development of ongoing local funding sources for sustainability of the services following termination of the three-year state grant.

2. **Program Staffing**

A résumé for each **key** professional staff person (e.g., Project Coordinator, School-Based Mental Health Professional, Mental Health Consultant) with their program title listed at the <u>top</u> must be included as an attachment to the application. The résumé should clearly identify each person's role in the program and the credential and/or license they possess. Résumés are not required for site principals and teachers unless they also have key responsibilities directly related to the EMHI funded programs and are responsible for the delivery of services.

<u>If professional staff will be redirecting a portion of their current scheduled time to serve the proposed EMHI funded program, an explanation must be included of how the redirection will be accomplished and who will assume the duties formerly fulfilled by the professional staff.</u>

Changes in key professional staff involved in program services must be approved in advance by the DMH. Written notification of the proposed change, along with the résumé of the new staff, must be submitted to DMH.

a. Project Coordinator

Identify and describe the role of the Project Coordinator. If the person that will fulfill these duties has already been identified, please list the qualifications they possess that make them appropriate for this position. Duties include administrative oversight of the program as well as direct involvement in implementing the program. The Project Coordinator must be a credentialed employee of the LEA (e.g., Administrator, Pupil Personnel Services, Teacher, etc.).

Indicate the average hours per week and weeks per year that the Project Coordinator will devote to the program. A range of two to six hours per week is recommended depending upon the number of sites implementing services, the level of services, and the application type. A detailed description of all duties that are directly related to the implementation and operation of the proposed services must justify the total hours per week for the Project Coordinator. If your application requires more than two to six hours per week of Project Coordinator time, delineate in this section why more time is needed.

b. <u>School-Based Mental Health Professional (SBMHP)</u>

Identify and describe the role of the person(s) who will be the SBMHP(s). If the person(s) that will fulfill these duties has already been identified, please list the qualifications they possess that make them appropriate for this position. <u>Such person(s) must be school psychologists, school counselors, or school social workers with a Pupil Personnel Services (PPS) credential.</u> Duties should include primary responsibility for supervision and training of the Child Aides and facilitating the selection of students for program services. Indicate the average hours per week and weeks per year that each SBMHP will devote to the program. Most commonly, the SBMHP is a school district employee. If your application varies from this typical arrangement, describe your arrangement (including how much time that person will spend on site) and how you think it will address the needs of your proposed program.

Experience has shown that in successful programs, the SBMHPs typically devote an average of four hours per week, per site. Of the four hours, a minimum of two hours per week is required for training and supervision of Child Aides. Varying factors affect this time commitment, such as the proposed application type, levels of services, combined training/supervision for multiple school sites, and/or a Mental Health Consultant who is actively involved in the training/supervision process. If your application requires more than four hours per week per site of SBMHP time, delineate in this section why it is thought that more time is needed.

c. <u>The Cooperating Mental Health Entity (Staff)</u>

The Cooperating Mental Health Entity shall be responsible for providing a licensed Mental Health Consultant (LMFT, LCSW, PhD) to assist the LEA with program implementation tasks that may include, but are not limited to, screening students beyond the scope of EMHI, supervision and training. Describe the services to be provided by the Cooperating Mental Health Entity staff. Services to students who have needs beyond the scope of the EMHI target population served may not be included in this application. Describe the cooperating entity's active ongoing role in supervision, training, and program implementation, if applicable. Indicate the average number of hours per week that each cooperating entity staff will devote to the program. All professional staff from the cooperating entity that will be devoting time to the proposed program must be included on the Program Summary form, as well as the Program Budget and Budget Justification.

Describe what efforts the cooperating entity will make to ensure that staff are representative of the program population and are culturally and linguistically competent.

The résumé enclosed in the attachments for cooperating entity staff should clearly indicate <u>at the top</u> the person's role in the program (e.g., "Cooperating Mental Health Entity: [training] [supervision] [consultation]") and include any licenses or credentials that qualify them for this position.

d. <u>Principals and Teachers</u>

Describe how principals and teachers will be involved in the program. Include the number of hours per week and weeks per year, which will be devoted to the proposed services. The amount of time devoted to the program services may be included in the Program Budget as LEA match. A formula must be provided for each classification showing how this amount was calculated.

The time that teacher may devote to the program will vary depending on the design of the program. If you include more than two hours per teacher per school year in match, it is important to explain how you calculated the teacher time and to delineate those elements of the program in which the teacher's time will be used.

e. <u>Other Staff (Professional and Classified)</u>

Other professional and/or classified staff may be directly involved in the program services, depending upon the proposed services. Identify and describe the role of any other staff who will be <u>directly</u> involved in the proposed program services. The time for other staff will vary among programs. Describe the duties and the average number of hours per week and weeks per year that will be devoted to the program by each staff. Staff described in this section should also be included in the Program Budget and Budget Justification.

Clerical administrative, custodial, and other support staff typically do not have a direct role in providing program services; however, if these staff are included as part of the Program Budget of the EMHI funded program, then a justification and a description of their duties, the average number of hours per week and weeks per year that will be devoted to the program must be provided in the application narrative. Your application will be stronger if these areas are addressed for <u>every staff member</u> who is listed under both the Grant Request column as well as the Local Match column of the Program Budget and in the Budget Justification.

f. <u>Child Aides</u>

A key element of EMHI is that direct services should be provided by alternative personnel, such as Child Aides rather than licensed or credentialed staff. A newly hired Child Aide working directly with students can typically serve <u>approximately</u> 12 students individually for each 15 hours of time (including time devoted to training and supervision). The same ratio applies for fractions of time beyond 15 hours. It is recommended that experienced Child Aides see no more than 12 to 16 students individually per week in a 15-hour position.

When Child Aides work with small groups of students, approximately seven to nine 45-minute sessions can be scheduled for 15 hours of Child Aide time. The same ratio applies for fractions of time beyond 15 hours. It is recommended that groups be limited to two to four students.

(1) Identify the number of Child Aides who will be working in the program. Describe their roles and responsibilities and provide the number of hours per week that each Child Aide will work.

(2) If the application is for an augmentation or enhancement of locally funded services at the sites listed in the application, provide the number of hours per week that the Child Aides currently provide services at the listed sites (at the time the application is submitted to DMH). The salaries and benefits of Child Aides currently providing services at the listed sites must also be included in the Program Budget and Budget Justification as match and should reflect the level of service in the grant year. Any proposed reductions in the current staff and/or current level of services must be explained.

Staffing of Child Aides must be consistent with the proposed number of identified students to be served and the amount of space dedicated to the program. The application should demonstrate this consistency in light of the following information:

1) The number of students in the grades targeted in the application (from the Anticipated School Enrollment Information). This population will shift somewhat in the three years in the grant due to the fact that new Kindergarteners will come into the school and 3rd graders will leave the population served by the grant. Base your figures on the total population of separate individual children in the population to be served by the grant over the three years of the grant.

2) Assume that approximately <u>30 percent</u> (30%) of all elementary school students experience moderate school adjustment issues (as noted in I. A.) and may be eligible for grant services.

3) Calculate the number of students who can be served by the Child Aides as noted in item (1) and (2) of this section. For the purposes of this calculation, it is assumed that any one child shall only have one series of EMHI services during the three years of the grant.

If the level of staffing requested in the grant appears higher than would be calculated using these factors, the applicant should explain why this increased staffing level is needed.

g. <u>Recruitment and Selection of Staff</u>

Describe the plan for recruitment and selection of all staff. Specify what effort will be made to hire professional staff and Child Aides who are representative of the program population and are culturally and linguistically competent.

E. **Description of Supporting Research**

Begin on a separate page titled **Description of Supporting Research**.

If this application includes a program service/curriculum listed below in the Grant Request or match, a description of supporting research is <u>not</u> required. DMH is familiar with the research for these listed program services. If the program service/curriculum is listed below, this part of the RFA should simply note: "Does not apply".

A World of Difference	Positive Action
Active Parenting	Positive Parenting
Active Teaching	Primary Intervention Program (PIP)
Assertive Discipline	Resolving Conflict Creatively Program (RCCP)
Back in Control	Second Step
Children of Divorce	Skillstreaming
Developing Capable People	Social Thinking and Responsibility (STAR 1)
Esteem Builders	Stages
Families and Schools Together (FAST)	Steps to Respect
Healthy Play	Systematic Training for Effective Parenting (STEP)
I Can Problem Solve (ICPS)	Tribes
Incredible Years	

This section must be completed for all other program services.

A maximum of eight (8) double spaced pages is allowed. Pages not used in this part may not be used for any other part of the application.

For the purpose of the RFA scoring, this section shall be incorporated in the scoring for Program Services. If the program service/curriculum is not listed above, respond to the following:

1. Provide the name and type of program service proposed in this application. Describe the research that established the validity of the proposed services and impact on the school adjustment of students in grades K-3. The description must include research that directly or indirectly supports each component of the proposed program service.

2. Identify school sites in California or elsewhere where this service is, or has been, implemented successfully.

3. Cite the source documents for this research.

A supporting bibliography may be included as an appendix, but must not include any information that is required to be in the narrative portion of the application.

If this application includes a program service/curriculum listed above in the Grant Request or match, a description of supporting research is <u>not</u> required.

(This concludes the Application Narrative portion.)

F. **Grant Development and Support**

Begin on a separate page titled **Grant Development and Support**. There are no page limitations for this part. Provide the following information.

1. Identify the key person(s) who prepared this application: i.e., name, job title, agency, and role in the proposed program.

2. Cite the source(s) of information used in preparing this application.

3. List the letters of support contained in the attachments.

4. Letters of Support

   Letters of support should reflect an understanding of the proposed program and should not be form letters. Letters of support **must be included** as part of the bound grant application and the three (3) additional copies. It is not required to include copies of these letters in the electronic copy. Letters of support sent directly to DMH will **not** be inserted into the application by DMH staff and will not be considered during the review process. The required letters of support must be on the appropriate agency/school letterhead and are described in the following items a through h. Omission of any of the required letters listed in items a through h, letters that do not address the specific requirements, or letters that are not on letterhead will result in the deduction of points during the review process. Letters of support must be addressed as follows:

   > John Lessley, Chief
   > State Level Programs Administration
   > California Department of Mental Health
   > [Address is omitted to prevent programs from mailing letters directly to DMH.]

   Letters are <u>required</u> from:

   a. **LEA superintendent**. In the case of a COE Consortium application (Page 10) submitted by a COE on behalf of up to five school districts (8 schools maximum), a letter is required from the COE superintendent, as well as the superintendent of each school district listed in the application.

   b. **Project Coordinator**. If the same person is the Project Coordinator and the School-Based Mental Health Professional, one letter indicating this may be submitted.

   c. **Principal** at each proposed site. <u>The principal's letter must include a statement describing the designated space (location and dimensions) at the school site(s) listed in the application</u>. This statement must also indicate whether the space will be for the exclusive use for the proposed program service or if it will be shared with other activities.

   d. **Faculty** of each proposed school site. This should be a single letter from each site signed by all K-3 faculty members. Please do not use "form" letters.

   e. **School-Based Mental Health Professional(s)** – If they have been identified.

f. **The Cooperating Mental Health Entity**. The letter must confirm the cooperating entity's participation in, and support of, the provision of collaborative services. Also, a letter from at least one cooperating entity must confirm that it will agree to screen referrals of low-income children the program has determined may be in need of mental health treatment services.

g. **Mental Health Consultant(s)** – If they have been identified.

Please Note: It is acceptable to provide one letter from the Cooperating Mental Health Entity and the Mental Health Consultant, as long as both the Entity and the Consultant have signed it.

h. Other letters of support may also be included.

IV. PROGRAM BUDGET PREPARATION INSTRUCTIONS

GENERAL INFORMATION

Each applicant must submit one detailed one-year Program Budget for the <u>total</u> program in accordance with the sample format and instructions provided in this RFA. Do not submit a Program Budget for each site listed in the application. **The Program Budget should be based on projected third-year costs.** The grant amount will remain the same for each of the three years. It is recommended that a State Program Analyst is contacted prior to implementing services or hiring staff because of revisions to the proposed Program Budget after awards are announced.

A. For FY 2011-12, the table on Page 11 describes the maximum amount of funds and number of sites that may be included for each LEA. The LEA is responsible for any portion of the total program cost not funded through EMHI. Grant awards are provided as reimbursement of LEA expenditures related directly to the EMHI funded program through bi-annual invoices. EMHI funds will not be provided as advance payments to the LEA.

B. The Program Budget must clearly indicate that a viable program will be in operation between August 1, 2011 (or the start of the school year), and June 30, 2012, at each school site. Program services should be budgeted for at least 36 weeks and no more than 38 weeks for a traditional schedule or year-round, single-track schedule and at least 44 weeks and no more than 48 weeks for a year-round, multi-track schedule. Include vacation and holiday time when determining the number of weeks. However, if the year-round sites operate (provide classroom instruction) fewer than 44 weeks, this must be reflected in the Program Budget, as well as explained in B. Characteristics of Applicant.

It is recommended that LEAs consider developing programs that are based on an average yearly grant cost of approximately $800 per student served. This figure is based on the actual cost of programs that have been proven effective. Priority will be given to applications that best meet the basic program requirements at the lowest cost per child (refer to Application Review and Scoring beginning on Page 3).

C. <u>Local Match Requirements</u>

In accordance with the provisions of EMHI, the Local Education Agency (LEA) and/or the cooperating entity(ies) must provide at least 50 percent (50%) of the TOTAL 3rd Year Costs (Total equaling Grant request plus LEA Match plus Other Match) program funding. Total state grant funds requested must be matched by local (LEA plus Other) matching funds for each year of the funding cycle.

1. Public and private funds or contributions from other agencies may also be included as match. For example, local Mental Health Services Act (MHSA) funds are public funds which might be used as match. LEAs should follow district policy, as well as any other state requirements, regarding the use of other funding sources for matching contributions of either cash or in-kind services.

2. All matches of in-kind services and/or resources must directly support the proposed grant-funded services and target population, be clearly described in the application narrative and be clearly identified in the Budget Justification as "Locally Funded."

3. A match of services or resources can be in the form of salaries, equipment, space, or property, and should be reasonable and valid.

4. Following are <u>categories for matching contributions</u>: (Reviewers will consider whether figures are based on reasonable costs.)

-   Salaries and benefits for staff <u>directly</u> involved in the program (professional and Child Aides). An appropriate contribution of services would be the redirection of a portion of the work week of a school psychologist or school counselor to the EMHI program. That person's salary and/or benefits portion would constitute the match.

    Note: The salary and benefit of any staff hired by the LEA to replace existing licensed or credentialed staff who are proposed to devote a portion of their time to the program MAY NOT be used as an match.

-   Cost of any other staff time devoted to the program (e.g., principals, teachers, substitute teachers, clerical, etc.).

-   Cost of materials and supplies (such as toys, paint, paper, and copying related to the program).

-   Cost of space. The total cost of space claimed as match for this program may not exceed 25 percent (25%) of the grant request.

-   Cost for equipment (such as tables, chairs, shelves, filing cabinets). Equipment purchases are a one-time expenditure and may be prorated over the three-year grant period.

-   Travel costs to workshops and meetings sponsored by the DMH.

-   Training costs.

-   Insurance (prorated). Insurance costs must be directly related to the funded program and are limited to 2% of the total budget allocation amount in the grant request column.

-   Indirect Costs. Any usual district Indirect Costs above 5% of the grant request may be included as Match.

-   Other (items which do not fall into one of the designated categories).

NOTE: If you are proposing to enhance or augment a previously funded EMHI program at the school sites identified in the application, you must maintain the previously funded EMHI program with local funds at the level described in this application for the full three-year grant period. The locally funded program services must be clearly identified in the application narrative and be shown as match in the Program Budget and Budget Justification.

a) An application that proposes an **augmentation** of locally funded PIP services at a school site must include the locally funded PIP services at the same school site as match, even if the services were never previously funded through EMHI. Other services must be discussed in III. E. Description of Supporting Research if they are

not listed on Page 30 as a program service with which DMH is familiar in order to be used as the local share of the matching grant in an application for the augmentation of locally funded services.

b) Any locally funded indirect service programs proposed to be used as the local share of the matching grant in **enhancement** applications must be discussed in III. E. Description of Supporting Research if they are not listed on Page 30 as a program service with which DMH is familiar.

c) For example, if an LEA wishes to use a locally funded parent education service as the local share of match to a grant funded PIP, the parent education service must be discussed in that section if it is not listed on Page 30 as a program with which DMH is familiar with. Also see Section II, A.2. and Section III.D.1.(c).

D. <u>Mandatory Program Budget Items</u>

1. The Program Budget must include travel costs to cover a one-day <u>mandatory</u> orientation meeting for all new professional staff and a <u>mandatory</u> training for program staff. The one-day mandatory orientation meeting will be held at specified locations throughout the state. The date of the orientation meetings will be announced later. All LEA key professional staff (Project Coordinator and School-Based Mental Health Professionals) are required to attend. Other staff directly involved in the program (e.g. Mental Health Consultant) are encouraged to attend. The orientation will provide training to professional staff in hiring Child Aides, mandatory program requirements, staff roles, and an overview of the process for the selection of students for potential referral to the program. The Program Budget should include costs for travel, meals, and possibly lodging and airfare to attend this meeting. There is no registration fee.

2. A mandatory training conference will be held annually each fall. The location of the training conference will be determined at a later date; for budgeting purposes the applicant should assume the training conference will be in Northern California in FY 2011-12. All key professional staff and all Child Aides are **<u>required</u>** to attend. Locally funded Child Aides, whose services are used as match in this application, are also **<u>required</u>** to attend the training conference. This cost should also be included in the Program Budget. In addition, it is helpful in establishing the program to invite principals, teachers, school board members, and parents to the conference. The conference provides training for professional staff and Child Aides in various aspects of program implementation and skills development. Estimated cost per person is approximately $710 (based on previous conference attendance). This amount includes the registration fee, hotel rooms, meals, and travel costs, excluding airfare. <u>Please Note:</u> If travel costs are more than $710, provide a breakdown and explanation of current prices to justify. Also, district staff are encouraged to share rooms to save travel costs.

3. There may be a one-day regional meeting in the spring that all program staff will be encouraged to attend. Regional meetings are usually held within 150 miles from any school site. The regional meeting provides training and may allow time for structured networking among programs in the same regional area. The Program Budget may include costs for travel and meals. There is no registration fee.

4. Cost of the mandatory statewide data collection as defined on Page 15.

PROGRAM BUDGET AND THE BUDGET JUSTIFICATION

The Program Budget form is on Page 46. The Budget Justification, an attachment to the Program Budget, must provide the formulas (calculations) showing how each dollar amount that appears on the Program Budget was calculated. **If it cannot be determined from the Budget Justification how the dollar figures were calculated, points will be deducted during the scoring process**. All amounts are to be rounded up or down to the nearest dollar.

A. The font size used for the Budget Justification must meet the requirements specified on Page viii, #15. There is no page limitation for the Budget Justification.

B. Identify each formula by the Program Budget line number (found on the Program Budget form) and column (i.e., Grant Request, LEA Match, or Other Match). Identify each formula for formerly EMHI funded services, which are now locally funded, and which are proposed to support the grant-funded services as "Locally Funded." If the applicant is seeking grant funds and providing match for the same item, provide the formula for the Grant Request column first.

C. The top portion of the Program Budget must be completed with the exception of the Account Number. The area for the Allocation Recipient should include the name of the LEA, and the address should be where reimbursements are to be mailed. This address may be different than the LEA's main address or the Project Coordinator's address.

Following are explanations of the allowable line item categories and examples of how line item amounts are calculated. The examples show how formulas on the required Budget Justification should look.

LINES 1-10: PERSONNEL

Salaries and benefits for staff (including release time for teaching staff, professional consultation, and training). The duties of all staff included in the Program Budget must be described in the Program Staffing section of the application narrative.

Identify the staff classification (Child Aide, School-Based Mental Health Professional [SBMHP], Project Coordinator, Mental Health Consultant [MHC], principal, substitute teachers, clerical, etc.). Indicate the **hourly rate** of identified staff, the **hours per week**, and **weeks per year** that each identified staff will work on the program. **The use of Full Time Equivalents (FTEs) or hours/days per year is NOT ACCEPTABLE and will result in a deduction of points**. Where there are multiple pay rates for the same position (principal, etc.), use an average wage.

Indicate the percentage of benefits for each staff classification. Add the benefit dollar amount to the salary dollar amount to arrive at the combined salary/benefit for each classification.

EXAMPLE: Line 1 - Child Aides (Grant Request)

3 Child Aides @ $8.41/hr. x 15 hrs./wk. x 36 wks. = $13,624.20 (rounded to $13,624)

Percent of benefits: 26%
$13,624 x .26 = $3,542.24 (rounded to $3,542)

$13,624 + 3,542 = $17,166 (Total Child Aide salaries and benefits)

Line 1 - Child Aides (LEA Match)

2 Child Aides @ $8.41/hr. x 15 hrs./wk. x 36 weeks = $9,082.80 (rounded to $9,083)

1. Percent of benefits: 26%
$9,083 x .26 = $2,361.58 (rounded to $2,362)

$9,083 + 2,362 = $11,445 (Total Child Aide salaries and benefits)

GRAND TOTAL: $17,166 + $11,445 = $28,611

ENTER THE TOTAL OF SALARY AND BENEFITS IN THE IDENTIFIED COLUMN AND ON THE IDENTIFIED PROGRAM BUDGET LINE FOR EACH CLASSIFICATION.

LINE 11: TOTAL PERSONNEL - Enter subtotals for each column on Program Budget form.

LINES 12 -19: OPERATING EXPENSES AND EQUIPMENT (OE&E)

LINE 12: Materials and Supplies

Identify the materials and supplies that will be required for the program for the year. This includes the cost of stocking an activity room, purchasing curriculum related to small group services, and providing literature and information to parents/teachers, within the context of the approved program. Typically, $700 per activity room is considered a reasonable cost for providing activity room supplies. Costs for mailing and photocopying related to the program may be included if they are not included in the overall Indirect Costs of the program and can be identified as such for invoicing purposes.

EXAMPLE: Line 12 - Materials and Supplies (Grant Request)

Supplies for 2 activity rooms @ $700 each = $1,400

LINE 13: Space

Indicate the dimensions of the activity room and key program staff areas, and the cost per square foot. THE COST OF SPACE MAY NOT BE PART OF THE GRANT REQUEST. Any space used as part of the program may be part of the Match provided by the LEA. The cost of space claimed as Match for this program may not exceed 25 percent (25%) of the grant request.

The Budget Justification must show the calculation for the actual cost of space. If the cost of space exceeds 25 percent (25%) of the grant request, the amount entered on the Program Budget cannot exceed the maximum allowable percentage. To determine the maximum allowable cost of space:

Total grant request x .25 = Maximum allowed for space.

EXAMPLE: Line 13 - Space (LEA Match)
2 activity rooms: 396 square feet (sq. ft.) each.
Cost: $3.55/sq.ft.
2 x 396 x $3.55 = $2,811.60 (rounded to $2,812)

Parent resource room: One room: 450 sq. ft. (dedicated full time)
Cost: $3.55/sq.ft.
450 x $3.55 = $1,597.50 (rounded to $1,598)
$2,812 + $1,598 = $4,410 (Total Cost of Space)

In the above example, assume the grant request is $20,000. The maximum allowable for space as Match is 25 percent (25%) of $20,000, or $5,000. The actual cost of space is $4,410 and under the $5,000 limitation; therefore, the entire cost of the space ($4,410) would be allowable as Match.

However, if the grant request is $12,000, then only $3,000 of the total cost of space ($4,410) would be allowed as Match ($12,000 x .25 = $3,000).

LINE 14: Equipment

Costs of providing necessary equipment for the program may be included in the Program Budget. Examples of equipment needed for the program may include activity room partitions, a filing cabinet, table, etc. Equipment purchases are a one-time only expense; therefore, the purchase of a specific item of equipment may only be included in the Program Budget once. Funding may not be utilized for electronic equipment over $500 of grant funds. Electronic equipment may be used as a program match if it is prorated over the three years of the grant.

The allocation recipient agrees that any item of equipment purchased for more than $1,500 and for which the LEA requests reimbursement from EMHI grant dollars shall be considered an entrusted state asset. An inventory list of said purchased equipment must be provided to the DMH by the end of the first fiscal year of the grant. The identified equipment may be subject to audit by the state at any time. Upon completion of the three year grant cycle, the DMH will determine whether the identified equipment will revert to the state property pool for future use by other EMHI programs in the local area or to allow the equipment to remain with the district. If the equipment is to be relocated to another site, the state will provide instructions regarding relocation and shipping.

EXAMPLE: Line 14 - Equipment (Grant Request)

Grant Request: 4 activity room partitions @ $150 each = $600. (first year only)

LEA Match: 4 activity room partitions @ $150 each = $600. Prorated over 3 years = $200 per year

LINE 15: Travel

Identify the cost of travel and each traveler's role in the program. Estimate the total number of miles that may be driven, the cost per mile, and any per diem costs (using the local per diem rate). EMHI funds cannot be used for reimbursement of out-of-state travel costs.

Included in this line item is the cost of a mandatory one-day orientation meeting for all new professional staff and a mandatory training conference each Fall for all program staff including all Child Aides. Estimated cost per person is approximately $710 (based on previous conference attendance). This amount includes the registration fee, hotel rooms, meals, and travel costs, excluding airfare. If travel costs are more than $710, please provide a breakdown and explanation of current prices as justification. Also, district staff are encouraged to share rooms to save travel costs.

There may be a one-day regional meeting in the spring, usually within 150 miles from the district (Page 35).

EXAMPLE: Line 15 - Travel (Grant Request)

1 Project Coordinator, 2 SBMHP (3 people) to attend orientation meeting: 3 x $125 = $375

1 Project Coordinator, 2 SBMHP, 1 MHC, 4 Child Aides (8 people) to attend Training Conference: 8 x $710 = $5680

1 Project Coordinator, 2 SBMHP, 1 MHC, 4 Child Aides (8 people) to attend spring meeting: 8 x $40 = $320.

LINE 16: Training

Identify the cost of providing or attending local training/workshops that are related specifically to the proposed program. Costs may include hiring consultants, providing speakers, and providing materials and child care that will assist in meeting the program goals. Training that involves a cost, either from EMHI or the local share of Match, must be described in the application narrative. Please identify all program staff that will be participating and which training they will attend.

EXAMPLE: Line 16 - Training (Grant Request)

Social Skills for K-3 Students training workshop for teachers @ $150 (speaker fee) = $150.

LINE 17: Insurance

Identify the prorated cost of any insurance that is related specifically to the program. THE COST OF INSURANCE MAY NOT BE PART OF THE GRANT REQUEST. Any insurance cost related to the program may be part of the Match provided by the LEA, but can be no more than 2% of the Total Budget/Allocation amount in the Grant Request column. A formula must be included showing how the cost of insurance was determined. Since there is no formula that would be consistent throughout the state, no example can be given.

LINE 18: Indirect Costs

Indirect Costs are the costs related to the implementation and operation of the program. The California Department of Education (CDE) defines Indirect Costs as agency-wide, general management costs (i.e., activities for the direction and control of the agency as a whole). General management costs consist of administrative activities necessary for the general operation of the agency, such as accounting, budgeting, payroll preparation, personnel services, purchasing, and centralized data processing.

Indirect Costs proposed in the Grant Request column shall not exceed five percent (5.00%) of the grant request for program operating costs. Any usual district Indirect Costs above 5% of the grant request may be included as Match. PLEASE NOTE: All Indirect Costs must be calculated based on the Total Budget/Allocation amount in the Grant Request column.

Indirect Costs generally charged in the LEA shall be considered to be no higher than the most recently available Indirect Costs Rate (ICR) available for the LEA approved by CDE. These rates may be found on the CDE website http://www.cde.ca.gov/fg/ac/ic/

Add Line 11 (Total Personnel) plus Line 20* (Total OE&E), plus Line 22 (Data Collection) and multiply by .05. The following Indirect Costs Worksheet is helpful when determining the maximum amount of Indirect Costs that may be included in the grant request column of the Program Budget.

II. Indirect Costs Worksheet (Grant Request Column)	
Enter the total amount of Personnel (Line 11)	
Enter the total amount of Operating Expenses and Equipment (Line 20)*	
Enter the amount of Data Collection/Evaluation (Line 22)	
Total	
Multiply by .05 (five percent)	.05
Maximum amount of Indirect Costs that may be included in the Grant Request column of the Program Budget.	

*The Line 20 total used in the above calculation is for program operating costs only, excluding Indirect Costs.

If an LEA's Indirect Costs exceed 5%, the LEA may claim the additional percentage as LEA Match. For example, if the LEA Indirect Cost is 5.75 %, the LEA may claim the additional .75% as LEA Match on the Grant Request. An LEA may not claim 5.75% as Indirect Cost on the LEA Match or other Match. For questions regarding this issue, LEAs are encouraged to contact the Technical Assistance Consultant or program analyst assigned to their region.

LINE 19: OTHER /LOCAL EVALUATION

Identify items that do not fall into one of the designated Program Budget categories. A rationale for such items should be clearly explained in the narrative portion of the application. A formula for the cost of each item must be included in the Budget Justification.

A local (in-house) program evaluation is optional. A maximum of $400 per school site, which may be either grant funds or match, may be spent on this component.
EXAMPLE: Line 22 – Local Data Collection/Evaluation (Grant or Match Request)

        2 school sites x $400 = $800

LINE 20: TOTAL OPERATING EXPENSES AND EQUIPMENT – Add the total of lines 12 through 19 for each column on the Program Budget form and enter the sum here.

LINE 21: TOTAL PERSONNEL AND OE & E – Add Line 11 and Line 20 and enter the total here.

LINE 22: STATEWIDE DATA COLLECTION AND EVALUATION

The statewide data collection costs, as defined on Page 15, Data Collection, must be included in the grant request.

Enter $800 per school site for participation in the statewide data collection system in the Data Collection line item on the Program Budget form. This fee is an estimated cost of required program evaluation instruments, scoring, and the evaluation of the information submitted by the program. This amount must be entered as part of the grant request. Because the cost of this service is an estimate, the DMH reserves the right to negotiate the applicant's Program Budget

to cover the cost of data collection.

EXAMPLE: Line 22 – Statewide Data Collection/Evaluation (Grant Request)

2 school sites x $800- = $1,600

LINE 23: TOTAL PROGRAM BUDGET/ALLOCATION – Enter the totals from Line 21 (Total
Personnel and OE & E) and Line 22 (Data Collection and Evaluation) for each column.

REMEMBER TO TOTAL ALL LINES ACROSS

**NOTE: The term "All Inclusive Requested Grant Amount" on the Grant Request form
refers to the amount of <u>grant</u> funds being requested for <u>one</u> fiscal year. This amount
should be calculated on the projected cost of the third year of program operation. The
grant amount will not be increased once it is approved by DMH, therefore it is important
to calculate the budget amounts based on the projected cost of the third year of
operation.**

V. APPLICATION CHECKLIST (For the convenience of the applicant and NOT to be included in the application).

The original and three (3) copies of the following documents must be submitted. <u>Applicants should also submit copies of those starred * items listed below on a thumb drive or CD-R clearly labeled with name of LEA and **securely attached in an envelope to the inside cover of the Original.**</u> Signatures are not necessary on electronic copies.

☐ Notice of Intent to Apply - Submit by **April 1, 2011** to:

<div align="center">

Grant Programs Management
1600 9th Street, Room 150
Sacramento, CA 95814
Or fax to (916) 654-2739

</div>

Documents must be assembled in the following order and forms completed and signed.

☐ *Grant Request form **(Must be signed and dated by the LEA Superintendent or his/her designee.)**

☐ *Program Summary

☐ *Program Budget

☐ *Budget Justification

☐ *School Enrollment Information and Student Demographics Chart

☐ *Characteristics of Applicant

☐ *Annual School Calendar(s)

☐ *School maps indicating location of Activity Room

☐ *Program Services and Staffing

☐ *Description of Supporting Research

☐ Grant Development and Support

☐ Letters of Support

☐ Résumés (for all professional staff: PC, MHC, SBMHP)

☐ Certification of Assurance of Compliance with Welfare and Institutions Code Section 4380(j)(10) (dated and signed with an original signature.)

☐ Certification of Assurance of Compliance with Underserved/Underrepresented Statistics (dated and signed with an original signature.)

☐ Original, plus 3 copies. Label the original as "Original" and each copy as "Copy."

☐ Each copy (including the original) must be securely bound separately, with a front and back cover. The front cover should be labeled with the name of the LEA, the county, and titled "<u>EMHI-2011 Department of Mental Health – Early Mental Health Initiative RFA</u>."

☐ Electronic Copy on a thumb drive or CD-R of the required portions of Grant Application

All four (4) copies of the Application, plus thumb drive or CD-R, should be submitted to: **<u>Department of Mental Health, EMHI Program, Grant Programs Management Unit, 1600 9th Street, Room 150, Sacramento, CA 95814</u>** and must be <u>received</u> by 5:00 p.m. on **May 9, 2011**.

VI. APPENDIX PAGE

BASIC COMPONENTS OF A PRIMARY INTERVENTION PROGRAM

Following are the basic components of a Primary Intervention Program (PIP) as outlined in the Welfare and Institutions Code, beginning with Section 4345, and as governed by the Welfare and Institutions Code, beginning with Section 4370, which provides the requirements of the Early Mental Health Initiative.

- PIP services must be delivered to students in kindergarten through third grade in publicly funded schools.

- PIP services must be provided to students who have been selected for program participation through a systematic selection process.

- Before acceptance of a child into PIP, parental consent is required.

- Each PIP must have a core team consisting of school-based mental health professionals (including school psychologists, school counselors, and school social workers with a Pupil Personnel Services credential), local mental health program professionals, and Child Aides.

- The school-based mental health professionals accept referred students into the program and assign students to Child Aides, supervise Child Aides, evaluate the students' progress, and make the determination when to end program services for the selected student. The school-based mental health professionals supervise the program evaluation process, conduct conferences with parents/guardians, and contribute to the evaluation of the effectiveness of individual aides.

- Supervised and trained Child Aides must provide weekly play sessions with students selected for program services.

- Child Aides must undergo a time-limited period of training that is focused on the main intervention strategies of the program and is provided prior to direct contacts with the children served in the PIP. Training must, at a minimum, include basic child development, crisis intervention, techniques of nondirective play, other intervention skills appropriate to identified problem areas, and instruction in utilizing supervision and consultation. Training should include any necessary content required by the LEA such as mandatory child abuse reporting training. However, the cost of any specific training which is required of all LEA employees dealing with children may not be included as part of the grant request since it is not specific to the EMHI funded program. It would be allowable to include the cost of the child aide hours in such training.

- School districts must demonstrate a capability for referral to appropriate public and private community services. The referrals must be made through contacts with families in response to information regarding the need for referral arising from the program services.

EARLY MENTAL HEALTH INITIATIVE
FY 2011-12 PROGRAM BUDGET

PROJECT COORDINATOR NAME: LIST SCHOOL SITES:

TELEPHONE NUMBER:

FAX NUMBER:

LEA NAME:

BILLING ADDRESS:

NUMBER OF SCHOOL SITES:

BUDGET CATEGORY	GRANT REQUEST	LEA MATCH	OTHER MATCH	TOTAL
PERSONNEL (IDENTIFY POSITION)				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11 TOTAL PERSONNEL				
OPERATING EXPENSES & EQUIPMENT (OE&E)				
12 Materials & Supplies				
13 Space (Maximum 25% of Grant Request)				
14 Equipment				
15 Travel				
16 Training				
17 Insurance				
18 Indirect Costs (Up to 5% of Grant Request)				
19 Other				
20 TOTAL OE&E				
21 TOTAL PERSONNEL AND OE&E				
22 DATA COLLECTION / EVALUATION				
23 TOTAL BUDGET / ALLOCATION	$	$	$	$

1. Name and Address of Applicant:	**2. LEA County:**
	3. LEA Superintendent:
	Superintendent Phone Number:

4. Type of Application: Mark an "X" in the appropriate box for the Application Type proposed in this application.

Primary Intervention Program (PIP) ☐ ☐   Other Model ☐   Enhanced Other Model ☐   Other Model and PIP ☐   Enhanced Other Model and PIP ☐

5. Name of Program Service/Curriculum to be implemented:

6. Expansion of an Existing Service to Other Sites: ☐ YES ☐ NO	**7. Augmentation:** ☐ YES ☐ NO

8. Project Coordinator Name and Address: Enhanced PIP	**9. Project Coordinator Contact Info:** **Office Phone:** **Alternate Phone:** **FAX:** **E-mail :**	**10. Cooperating Mental Health Entity(s):**

11. Proposed school sites	**a. Calendar T, MT, or YR**	**b. Last Year EMHI Funded**	**c. Last Year Locally Funded**	**d. # of Grant-Funded Child Aides Proposed**	**e. Hours Per Week Per Grant-Funded Child Aide**	**f. K-3 Students at Site**	**g. Students to Receive Direct Services**	**h. Students to Receive Indirect Services**	**i. Teachers to Receive Indirect Services**	**j. Parents to Receive Indirect Services**
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
k. Totals										

12. 3rd Year Grant Request $_____	**13. Percent of Grant Request to Total Cost: _____%**	**14. Estimated Cost Per Student (Grant Funds Only) to Receive Direct Services.** $_____

15. Total Number of K-3 students in the District: _____

16. Key Professional Staffing Summary

a. Role in Program	**b. Name**	**c. Credential/License**	**d. Grant Hrs/wk**	**e. Match Hrs/wk**	**f. Employee Of**
Project Coordinator					
Mental Health Consultant					
School Based Mental Health Professional					

17. Training and Supervision of Grant-Funded Child Aides

a. Type (individual or group)	b. Frequency	c. Duration	d. Location	e. Provider(s)
Individual Supervision				
Group Supervision				
Group Training				

18. Clearly describe the basic elements of the proposed services to students, staff, and/or parents:

19. Name of Person from LEA to Contact: In the event that there are questions about this application, the following individual will be the only point of contact between the DMH and the LEA.

Typed Name: _____   **Title:** _____   **Role in EMHI Program:** _____

Email Address: _____   **Telephone Number:** _____   **Date:** _____

20. PROJECTED CONFERENCE ATTENDANCE

Enter the estimated number of people who will attend the Training Conference to be conducted in November 2011 (remember, all key staff are required to attend this conference). Do not include staff from any continuing EMHI funded programs:

Child Aides:_____   **Project Coordinator, SBMHPs and MHC Consultants:**_____   **Others:**_____

INSTRUCTIONS FOR COMPLETING THE EMHI PROGRAM SUMMARY

All of the required program information must be placed on the form in the space allowed. Additional pages may NOT be added except to list additional schools, school districts, key professional staff, and/or Cooperating Mental Health Entities.

1. **Name of Applicant (LEA):** Enter the complete name and address (no abbreviations) of the LEA (County Office of Education or School District) that is applying for EMHI funding.

    Applications submitted by a county office of education or jointly by two or more school districts should designate the county office of education or one of the school districts as the LEA and enter its name and mailing address on the form. Do not list more than one LEA on this form. County office of education or joint school district applications may include a separate page listing each district, the district mailing address, and each school site in that district where the proposed EMHI funded program will be implemented.

2. **LEA County:** Provide the county where the Local Education Agency (LEA) is located.

3. **LEA Superintendent and Phone Number:** Enter the designated LEA Superintendent's name and telephone number, including the area code.

4. **Type of Application**: Mark with an "X" the type of application proposed for EMHI funding. The services proposed in the application must be described in detail in Program Services and Staffing. Definitions of the six different application types are as follows:

    - Primary Intervention Program (PIP): Direct services using one-to-one, nondirective play techniques delivered by trained and supervised grant-funded Child Aides.
    - Other Model: Direct services that are not PIP.
    - Other Model and PIP: Combination of Other Model and PIP.
    - Enhanced PIP: Direct services are PIP and indirect services are provided to parents, teachers, and/or classrooms
    - Enhanced Other Model: Other Model direct services and indirect services provided to parents, teachers, and/or classrooms.
    - Enhanced Other Model and PIP: Other Model and PIP with indirect services provided to parents, teachers, and classrooms.

5. **Name of Program Service/Curriculum to be Implemented:**

    - If the service is only PIP you will enter "Individual Services – PIP".
    - Group services should indicate "Group Services" followed by the name of the research based program/curriculum to be implemented.
    - Enhancements services should enter the population to be served (classroom students, teachers, parents, etc) followed by the name of the research based program to be implemented.

6. **Expansion of an Existing Service to Other Sites Within the LEA**: Mark with an "X" either Yes or No if the application is for the expansion of the existing application type to other school sites within the LEA.

7. **Augmentation:** Is this an augmentation of services that will be locally funded for the duration of this grant?

8. **Project Coordinator**: <u>ONLY ONE PROJECT COORDINATOR MAY BE DESIGNATED FOR EACH GRANT APPLICATION</u>. Enter the name, and mailing address of the designated Project Coordinator.

9. **Project Coordinator Contact Information:** Enter the office phone number, an alternate phone number, a FAX number, and an e-mail address for the Project Coordinator.

10. **Cooperating Mental Health Entities**: List the names of all Cooperating Mental Health Entities that will

participate on the proposed program. You may include additional Cooperating Mental Health Entities on a separate page if there is not sufficient space on this form.

11. **Proposed School Sites:** List the names of the school sites proposed in this application. Complete a-j below for each.

   a. **Calendar:** Indicate type of annual calendar the school follows. Enter Traditional (T), Modified Traditional (MT), or Year-Round (YR). Include a copy of the school's calendar at the end of Characteristics of Application section in the application.
   b. **Last Year EMHI Funded:** If any listed site was initially funded through EMHI since 2001-02, enter the year the EMHI funding **ended**.
   c. **Last Year Locally Funded:** If any site listed was formerly funded through EMHI since 2001-02, and the program was continued with local funding, enter the last year of local funding. If the school site is operating a locally funded program at the time this application is being made, enter a "C."
   d. **# Of Grant-Funded Child Aides Proposed:** Enter the number of grant-funded Child Aides that are being proposed for each site. This section does not apply for applicants proposing enhancement services that do not include grant-funded Child Aides.
   e. **Hours per Week per Grant-Funded Child Aide:** Enter the number of proposed hours that <u>each</u> grant-funded Child Aide will work at each site. (Does not apply for applicants proposing enhancement services that do not include grant-funded Child Aides.)
   f. **K-3 Students at Site:** Enter the total of all K-3 students enrolled at the site.
   g. **Students to Receive <u>Direct Services</u>:** Enter the estimated total number of students to receive direct services with EMHI grant funds in one year. The estimate should only include students who will have at least four service contacts in one year. This does NOT include students served with local funds.
   h. **Students to Receive <u>Indirect Services</u>** (pertains only to Enhancement applications)**:** Enter the estimated total number of students to receive indirect services with EMHI grant funds in one year. This does NOT include students served with local funds.
   i. **Teachers to Receive <u>Indirect Services</u>** (pertains only to Enhancement applications)**:** Enter the estimated total number of teachers to receive indirect services with EMHI grant funds in one year. This does NOT include students served with local funds.
   j. **Parents to Receive <u>Indirect Services</u>** (pertains only to Enhancement applications)**:** Enter the estimated total number of parents to receive indirect services with EMHI grant funds in one year. This does NOT include students served with local funds.
   k. Total: Enter the totals for each column d-j.

12. **Third Year Grant Request**: Enter the amount of STATE grant funds requested for one year. This figure should be the same amount as line 23 of the Program Budget form and on the Grant Request form. This amount should reflect the estimated cost of the third year of program operation.

13. **Percent of Grant Request to Total Cost**: Enter the percentage of the grant request in relation to the total program cost. For example, if the total program cost is $80,000 and the grant request is $32,000, the percent of the grant request is 40% ($32,000/$80,000 = 0.40). GRANT REQUESTS THAT EXCEED 50% OF THE TOTAL PROGRAM COST WILL BE PENALIZED DURING THE SCORING PROCESS.

14. **Estimated Cost Per Student**: Enter the estimated cost per student to be served in one year. To determine the estimated cost per student, divide the Grant Request (number 12) by the Estimated Number of Students to Receive Direct Services with Grant Funds (number 11g). If the application is for Enhancement Services only, mark "N/A" in this section since there will not be a cost per student.

15. **Total Number of K-3 Students in the <u>District(s):</u>** Enter the total number of K-3 students.

16. **Key Professional Staffing Summary:** Complete the following for each Project Coordinator, School Based Mental Health Professional, and Mental Health Consultant (do not list Child Aides). Use an additional page if necessary.

   a. Role in Program: List the title of each key staff role.

b. Name: Enter the name of the person that will assume this role. If the position will not be filled until the grant is funded enter "To Be Hired".
c. Credential/License: Enter the credential (LEA) or License (Mental Health Entity) that qualifies the person for this position.
d. Grant Hrs/wk: Enter the total hours per week each key staff will devote to the proposed program with grant funding. **DO NOT USE FULL TIME EQUIVALENTS (FTEs)**.
e. Match Hrs/wk: Enter the total hours per week each key staff will devote to the proposed program with local match funding. **DO NOT USE FULL TIME EQUIVALENTS (FTEs)**.
f. Indicate whether employed by LEA, COE, etc.

17. **Training and Supervision of Grant-Funded Child Aides:**

a. Type: Indicate if each training and/or supervision session will be individual sessions or group sessions. Indicate if each session will be a supervision meeting or a training meeting.
b. Frequency: Indicate the frequency of each type of training and supervision session (weekly, bi-weekly, monthly, etc)
c. Duration: Indicate how long each training and supervision will last.
d. Location: Indicate where each type of training/supervision session will take place (school site, District office, etc.)
e. Provider(s): Indicate who will provide each training/supervision session (SBMHP, MHC, outside trainers, etc)

18. **Clearly describe the basic elements of services to students, staff, and/or parents**: Briefly describe the proposed program services and what they will accomplish.

19. **Name of Person from LEA to Contact**: Enter the name, title, role in EMHI program, e-mail address, and telephone number of the person to contact should there be questions regarding this application. Failure to designate a contact from the LEA will result in a deduction of points. Enter the date.

20. Enter the number of staff who will attend the training conference for this grant. **Do not include staff from any continuing EMHI programs.**

COUNTY:_____   **School District or County Office of Education:** _____

District Code_____

EMHI-2011
ANTICIPATED SCHOOL ENROLLMENT INFORMATION (FY 2011-12)

SCHOOL	SCHOOL CODE	K	1	2	3	4	5	6	TOTAL STUDENTS	NUMBER OF STUDENTS EXPECTED TO BE SERVED PER YEAR
TOTAL										
TOTAL K-3 ENROLLMENT										

ESTIMATED STUDENT DEMOGRAPHICS (FY 2011-12)

School	Current Enrollment	% Free & Reduced Lunch	% Family LEP	% Out-of-Home Placement[1]	% American Indian	% Asian	% Pacific Islander	% Filipino	% Hispanic	% African American	% White	% Multi/ Other

[1] A student is considered to be in an **out-of-home placement** when not living with at least one biological or adoptive parent

Score Sheets Faxed to: _____
FAX Number: _____
Date: _____
Sent By: _____   Rater Number: _____

EMHI-2011
APPLICATION SCORE SHEET

Number of Sites: _____   Application Number: _____

School District/County Office of Education: _____

County: _____

Application Type:	**Points Less Than Maximum**					**Maximum Points**	**Score**
					Average Application		
1. Characteristics of Applicant	0	2	4	6	8	10	
2. Program Services	0	6	12	18	24	30	
3. Program Staffing	0	3	6	9	12	15	
4. Cultural Competency	0	2	4	6	8	10	
5. Program Budget	0	4	8	12	16	20	

6. Letters of Support	0	1	2	3	4	5	
7. Adherence to RFA Instructions	0	2	4	6	8	10	
Application Score						100	

COMMENTS: (Indicate rationale for any high/low scores given for a specific category **on the reverse side of this page**)

GENERAL COMMENTS AND SUGGESTIONS:

Indicate rationale for scores, including any low scores given

1. Characteristics of Applicant
2. Program Services
3. Program Staffing
4. Cultural Competency
5. Program Budget
6. Letters of Support
7. Adherence to RFA Instructions

EMHI-2011

Certification of Assurance of Compliance with
Welfare and Institutions Code Section 4380(j)(10)

Pursuant to Sections 4380 et seq. of the Welfare and Institutions Code (Chapter 757, Statutes of 1991, Assembly Bill 1650),
_____ (name of local education agency) has applied for a matching grant for school based early mental health and intervention and prevention services.

As an authorized representative of the above named local education agency, I have read and am familiar with Section 4380(j)(10) which states in pertinent part: "Each matching grant application submitted shall include . . . [a]ssurance that grants would supplement and not supplant existing local resources provided for early mental health intervention and prevention services."

I certify under penalty of perjury that a grant awarded to the above named local education agency, in accordance with Sections 4380 et seq. of the Welfare and Institutions Code, will supplement and not supplant intervention and prevention services.

_____   _____
Signature   *Date*

_____   _____
Title   *Location*

EMHI-2011

Certification of Assurance of Compliance with
Underserved/Underrepresented Statistics

Pursuant to Sections 4380 et seq. of the Welfare and Institutions Code (Chapter 757, Statutes of 1991, Assembly Bill 1650).

_____ (name of Local Education Agency) has applied for a matching grant for school based early mental health and intervention and prevention services.

As an authorized representative of the above named Local Education Agency, I have read and am familiar with Section 4380(g)(1) which states: "the Local Education Agency will serve the greatest number of pupils from low-income families" (Anticipated School Enrollment form, page 52).

I certify under penalty of perjury that a grant awarded to the above named local education agency, identifies site(s) which include at least 50% of school sites whose low income families **exceed** 85% Free and Reduced Lunch.

☐ Priority funding criteria applies to the following sites:

_____

_____

OR

☐ Priority funding criteria is **not** applicable to the application for:

_____
Local Education Agency

_____   _____
Signature   *Date*

_____   _____
Title   *Location*

STATE OF CALIFORNIA
DEPARTMENT OF MENTAL HEALTH

GRANT REQUEST FORM
NUMBER: EMHI-2011
DATE: May 9, 2011

TITLE: **DEPARTMENT OF MENTAL HEALTH -- EARLY MENTAL HEALTH INITIATIVE**

The undersigned applicant hereby proposes to provide the services specified in:

      Characteristics of Applicant
      Program Services and Staffing
      Description of Supporting Research
      Program Budget
      Budget Justification

It is understood that the Local Education Agency (LEA) will receive an allocation letter from the State Department of Mental Health which outlines program, fiscal, and general requirements.

Pursuant to the attached provisions of this program, our all-inclusive <u>requested grant amount for ONE YEAR (fiscal year 2011-12)</u> is entered below. **(This amount should be the same as the amount on line 23 of the Program Budget form and should represent the third year cost of program operation.)**

REQUESTED GRANT AMOUNT: $_____

The following information must be completed and signed by the LEA Superintendent or his/her designee:

_____

Authorized Signature   *Date*
Superintendent or Designee, School District/County Office of Education

_____

Type or Print Signer's Name and Title

_____

Type or Print the Name and Telephone Number of the Person to Contact Regarding this Application

Name and Address of the LEA:

_____

Federal Identification Number

EMHI-2011 RFA Automatic Deductions
These will be evaluated by EMHI staff prior to the formal RFA review.

COUNTY:

SCHOOL DISTRICT:

REVIEWED BY:

There can be no more than 10 points deducted for any combination of Automatic Deductions.
There can be no more than 2 points deducted from any combination of Minor Deductions.

MAJOR DEDUCTIONS - 5 Points (maximum of 10 Points total for any combination)

Omission of required forms • Grant Request form (if not signed by LEA Superintendent or designee this will be regarded as omitted) • Program Summary form • Program Budget form • Budget Justification • School Enrollment Information and Student Demographics Chart • Certification of Assurance of Compliance with Welfare and Institutions Code Section 4380 (j) (10) (if not signed by LEA Superintendent or designee, this will be regarded as omitted) • Certification of Assurance of Compliance with EMHI 2011 Underserved/Underrepresented Statistics (if not signed by LEA Superintendent or designee, this will be regarded as omitted)	
Major font size, margins, or spacing violations that appear, in the opinion of the reviewer, to have significantly allowed the applicant to include more content in those sections of the RFA that have limits (up to 10 points).	
Résumés for key professional staff	
Failure to submit an electronic copy	

MINOR DEDUCTIONS - 1 point (maximum of 2 points total for any combination)

Each separate copy of the application is not securely bound or does not have a front cover that identifies the applicant's name and county.	
The application is not assembled in the correct order according to the Checklist provided in the RFA.	
The application does not have all of the required (Bolded and Underlined) headings in the correct sequence in the four narrative parts of the application	
Minor font size, margin, or spacing violations which do not appear, in the opinion of the reviewer, to have significantly allowed the applicant to include more information in the application.	
Omission of the required items • Annual School Calendar • Individual school site maps indicating the location of activity room	
Any required form that is incomplete.	

Statewide Program Evaluation Components

All programs funded through EMHI must participate in the statewide evaluation regardless of the application type/services being implemented. The collection of the program data statewide <u>is a requirement</u> of receiving an EMHI grant. The cost of participation includes all the evaluation instruments, the processing of these instruments, and a complete analysis of the data for every school site.

This section briefly outlines the procedures that must be completed by the applicant as part of the statewide program evaluation. <u>DMH reserves the right to modify these procedures or any instruments during the course of the grant</u>.

EVALUATION INSTRUMENTS

Following is a brief explanation of each instrument, who is responsible for completing it, and whether it is necessary to have it scored by the independent evaluator.

Walker Survey Instrument (WSI)

The **classroom teacher completes** the Walker Survey Instrument (WSI). All first graders are surveyed using the WSI. Many programs also survey students at other primary grade levels. It is recommended that students be surveyed after they have had a chance to adjust to the school environment (typically four to six weeks). For schools operating on a traditional calendar, the survey of students enrolled in kindergarten should take place after the first semester. For schools operating on a year-round calendar, the survey of students enrolled in kindergarten should take place near the middle of the year. **All completed WSI forms must be submitted to the independent evaluator for processing, whether or not the forms were self-scored.** Project coordinators and school-based mental health professionals (SBMHP) must decide whether to self-score the WSI forms before submitting the WSI forms to the independent evaluator. In the event that there is no evaluator, retain the completed forms at the LEA until instructed from DMH.

Walker-McConnell Scale (WMS)

The Walker-McConnell Scale (WMS) is mandatory for all students participating in an EMHI funded program and is **completed by the classroom teacher** before the student enters the program and again when the student exits the program. The WMS **must** be sent to the independent evaluator for scoring. Some projects have found it helpful to self-score and graph the results of the WMS prior to mailing them. In the event that there is no evaluator, retain the completed forms at the LEA until instructed from DMH.

Participant Data Instrument (PDI)

The Participant Data Instrument (PDI) <u>must</u> be completed and submitted to the independent evaluator for processing for all students who participate in EMHI funded services. The instrument is completed by the Child Aide and SBMHP with input from the classroom teacher. The instrument is used to record demographic information; document the levels, types and duration of services provided; and provide additional exit and outcome information about each participant. In the event that there is no evaluator, retain the completed forms at the LEA until instructed from DMH.

Identification (ID) Numbers

A unique six-digit number must be used for every student at each school site. A unique ID number means that no two students at a particular school can have the same number during the same school year. It is the responsibility of local program staff to develop a system for assigning ID numbers and maintaining an index of student names and ID numbers. The Project Coordinator should decide on a single strategy for assigning ID numbers. The method used to assign ID numbers must be simple, so that all program staff can easily and accurately use the selected method.

For more information about the statewide evaluation requirements of EMHI funding, applicants may contact the Technical Assistant Consultant assigned to their county.

Following are the Bolded and Underlined headings (in the sequence shown) which you must respond to in the RFA. If a section does not apply, you should include it and note "Does not apply". Please use this as a guide.

Characteristics of Applicant

1. Community Level
2. District Level
3. Site Level

Program Services and Staffing

1. **Program Services**
    a. Description of Proposed Application Type, Program Services, and Student Needs
    b. Direct Services
        Grant Funded Direct Services
        Locally Funded Direct Services
    c. Indirect Services (Enhancements)
    d. Expansion Services
    e. Augmentation of Previously Funded Services
    f. Systematic Selection Process
    g. Out-of-Home Placement
    h. Parent Notification and Approval
    i. Parent Involvement
    j. Training and Supervision
    k. The Cooperating Mental Health Entity
    l. Space
    m. Healthy Start
    n. Program Evaluation
    o. Program Continuation

2. **Program Staffing**
    a. Project Coordinator
    b. School-Based Mental Health Professional (SBMHP)
    c. The Cooperating Mental Health Entity (Staff)
    d. Principals and Teachers
    e. Other Staff (Professional and Classified)
    f. Child Aides
    g. Recruitment and Selection of Staff

Description of Supporting Research

Grant Development and Support

PROGRAM BUDGET AND THE BUDGET JUSTIFICATION

LINES 1-10: PERSONNEL
LINE 11: TOTAL PERSONNEL
LINES 12-19: OPERATING EXPENSES AND EQUIPMENT (OE&E)
LINE 12: Materials and Supplies
LINE 13: Space
LINE 14: Equipment
LINE 15: Travel
LINE 16: Training
LINE 17: Insurance
LINE 18: Indirect Costs
LINE 19: OTHER/LOCAL EVALUATION
LINE 20: TOTAL OPERATING EXPENSES AND EQUIPMENT
LINE 21: TOTAL PERSONNEL AND OE&E
LINE 22: STATEWIDE DATA COLLECTION AND EVALUATION
LINE 23: TOTAL PROGRAM BUDGET/ALLOCATION